

VISION

All children in Riverside County are healthy and thrive in supportive, nurturing and loving environments and enter school ready to learn and embrace lifelong learning

## FUNDING FOCUS FOR ECE & HCP

### EARLY CARE AND EDUCATION

#### Primary Focus

- Quality Workforce
- Quality Availability

#### Secondary Focus

- Early Care Scholarships
- Quality Physical Settings
- Parent Education

#### Pilot Projects

- Early Care Services & Supports to Families in Crisis
- Evidence-Based Home Visiting
- Quality Care for Children with Special Needs

### HEALTH & COMMUNITY PROGRAMS

#### Primary Focus

- Health Access
- Health Optimization
- Oral Health
- Mental Health

#### Secondary Focus

- Asthma Management
- Nutrition
- Physical Activity

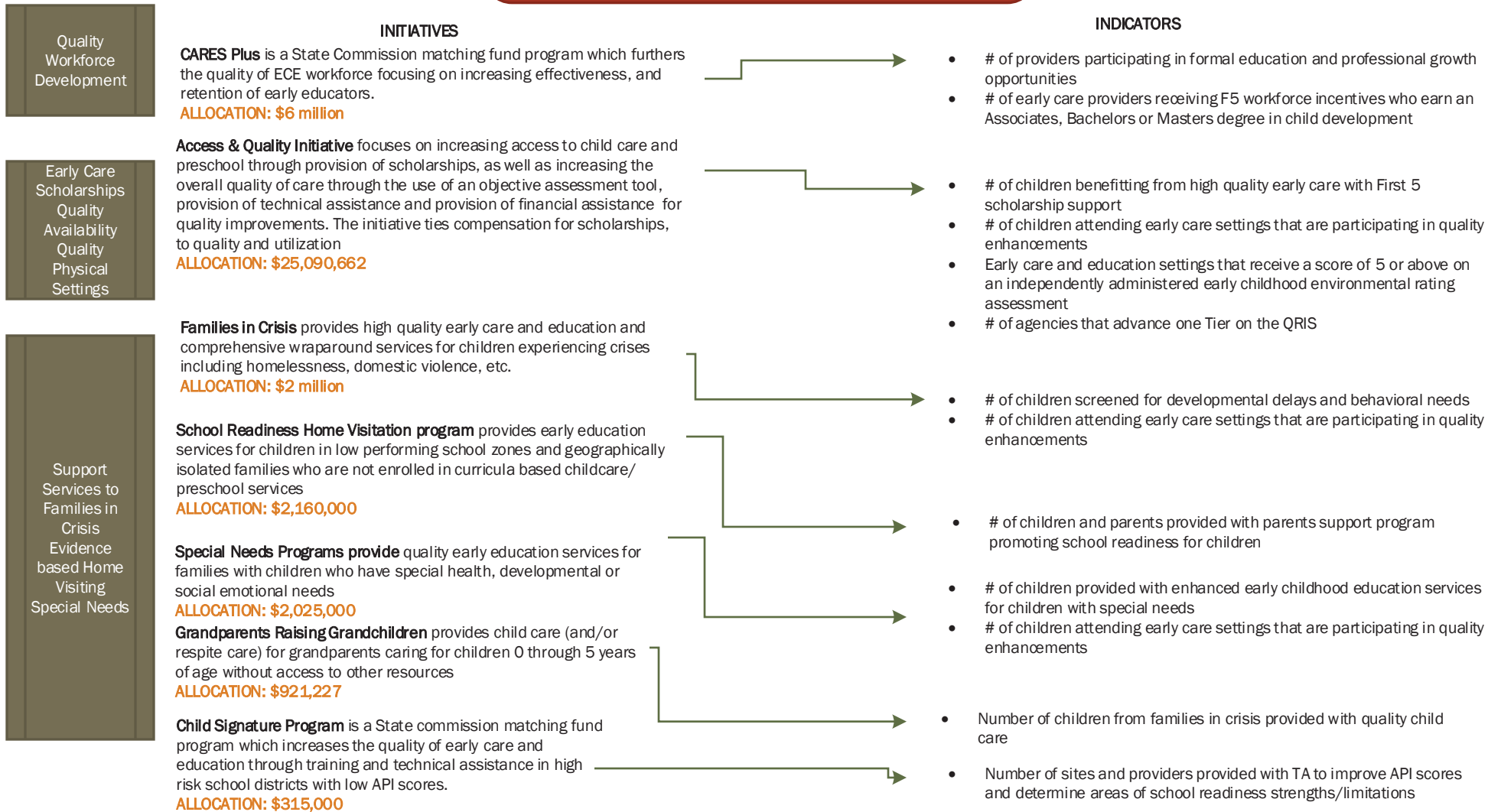
#### Pilot Projects

- Targeted Home Visitation
- Special Needs

F5R will focus investments in early care and education strategies that emphasize the importance of parents ability to locate, afford, and utilize high quality child care as well as to educate parents and caregivers in ways they can promote optimal early childhood development in everyday practices.

Early Childhood Education

TOTAL ALLOCATION AMOUNT: \$38,511,889



F5R will focus the majority of its health investments by increasing access to and appropriate utilization of health services, early intervention, and promoting optimal health through a combination of parent and caregiver education.

## Health & Community Programs

**TOTAL ALLOCATION AMOUNT: \$49,366,164**

### INITIATIVES

### INDICATORS

Asthma Management

**Asthma Management Services** provide comprehensive asthma education, screening and support services to children; to decrease hospitalization and inappropriate utilization of emergency department

**ALLOCATION: \$3,079,483**

- Reduction of rate of asthma hospitalization for children 0-4
- # of physicians trained in asthma (PACE training)
- # of child care staff provided with asthma management training
- # of children screened for asthma related symptoms
- # of environmental assessments completed of child care sites;
- # of sites provided with TA and asthma management

Breastfeeding Support

**Breastfeeding Support Services** provide services to expectant and lactating women through information, assistance, training and education.

**ALLOCATION: 3,839,990**

- % of babies exclusively breastfed at hospital discharge

Build New Capacity to Expand Healthcare

**Pediatric Residency program** increases access to healthcare by addressing the critical shortage of pediatric care that challenges hundreds of families with young children. Long term objective is to determine the number of physicians remaining in the County to practice pediatrics post graduation, on an annual basis.

**ALLOCATION: \$3,845,173**

- Development and implement residency training curriculum
- Number of loan-to-scholarship enrolments

Health Access, Utilization & Retention

**Access and utilization** of and retention of health insurance for children 0 through 5 years of age. Alleviate barrier to health care. Improve health outcomes and ensure children have a medical home.

**ALLOCATION: \$6,434,366**

- # of children 0-5 with health insurance
- % of children, by age, who have received the American Academy of Pediatrics (AAP) recommended schedule of well child exams
- % of children receiving immunizations per the AAP recommended schedule

Targeted Home Visitation

**Targeted Home Visitation program** promotes optimal birth outcomes and maternal/child health. Focus is on improved pregnancy outcomes, child health & utilization of comprehensive healthcare services and personal and social support systems that promote well-being.

**ALLOCATION: \$2,635,576**

- % of women receiving early prenatal care
- % of babies born with low birth weight
- % of pre-term births
- # of parents receiving psycho-social screenings for depression, substance abuse, and other risk factors, who are referred for treatment for depression and other family risk factors.

Nutrition & Fitness Activities

**Nutrition and Physical Activity** program provides Self-Assessment for child care facilities and provider education, to implement an obesity prevention/intervention program.

**ALLOCATION: \$2,700,000**

- Number of child care sites trained and provided with TA; policies and practices that promote optimal nutrition and physical activity for children 0-5 and their families

Oral Health

**Oral Health program** provides education, screening and treatment services as well as establishing a dental home for uninsured and underinsured children 0 through 5 years of age.

**ALLOCATION: \$10,925,998**

- % of children 2-5 who have received oral health exam in the past year
- # of children provided with screening, treatment and education
- # of children linked to a dental home

Mental Health

**Mental Health Services** provide a full continuum of primary prevention, screening, intervention, and treatment services within high risk communities.

**ALLOCATION: \$15,905,578**

- % of children receiving developmental and social-emotional screenings
- # of children receiving developmental/and or behavioral health support services as a result of a referral from a screening
- # of parents provided with parenting intervention (parenting support)

Systems Change & Capacity Building Goals & Strategies For Investment

Systems Change & Capacity Building

ALLOCATION: \$1,242,835

INITIATIVE

INDICATORS

Systems Change & Capacity Building Goals & Strategies for Investment

These funds were set aside to ameliorate the reduction in Prop. 10 funds by making long-term and sustainable change in Riverside County that supports the healthy development of young children and their families. This includes an emphasis on leveraging other funds, improving the sustainability of programs and organization serving young children, and other partnerships with public and private entities.

Goals to be achieved:

- Integration of services across Strategic Plan focus areas
- Accountability & Evaluation of funded services
- Education of public, providers, and parents
- Coordinated Service Delivery
- Early Childhood Advocacy
- Sustainability of services despite reduced Prop.10 funds
- Awareness of Services
- Training and Technical Assistance
- Public Education

- % of funded agencies that are leveraging public funding
- # of funded agencies providing co-located services
- # of funded agencies with expanded service hours or with flexible schedules
- # of agencies participating in F5R sponsored trainings/ workshops designed to enhance community services
- Community members are knowledgeable about importance of a child's first 5 years
- Parents report that they are aware of existing services and program for children 0-5
- Policies and practices have been adopted which promote early childhood health and development

Funded Agencies By Initiative – Early Care & Education 2011 - 2016

EARLY CARE AND EDUCATION

**Child Care & Respite Coordination Services  
Grandparents Raising Grandchildren**

- Riverside County Office on Aging

**Child Signature Program**

- First 5 Riverside

**Enhance Quality Workforce**

- The Regents, University of California, Riverside( UCR) Technical Assistance Program
- UCR, CARES Plus

**Families in Crisis**

- Martha's Village and Kitchen
- Path of Life Ministries

**School Readiness Home  
Visitation Program**

- El Sol Neighborhood Center

**Special Needs Program**

- Bermuda Dunes Learning Center
- Perris USD
- VIP TOTS

**Access & Quality Scholarships**

- ABC Child Care Village (2 programs)
- Bermuda Dunes Learning Center
- Bobadilla Family Child Care
- College of the Desert – McCarthy Family Development Center
- Corona Norco Family Men's Association (3 Locations)
- Dobson Christian Preschool and Childcare
- Escuela De La Raza Unida
- Green Tree Preschool and Child Care
- Martha's Village & Kitchen
- Mt. San Jacinto College
- Nash-Jordan Family Child Care
- Nuview Child Development Elementary School
- Nuview Valley View Elementary school
- Palm Springs USD
- Perris Elementary school District
- Riverside City College
- The Growing Place, Too
- Town & Country Day School
- VIP TOTS

## Funded Agencies By Initiative – Health 2011-2016

### HEALTH AND COMMUNITY PROGRAMS

#### Asthma Management Services

- Loma Linda University
- Riverside County Department of Public Health

#### Home Visitation

- El Sol Neighborhood Center
- Riverside County Department of Public Social Services

#### Breastfeeding Support Services

- Riverside County Department of Public Health – Breastfeeding Services
- San Geronio Memorial Hospital

#### Mental Health Initiative

- Riverside County Department of Mental Health
- Family Services Association

#### Build New Capacity to Expand Healthcare

- University of California, Riverside - School of Medicine

#### Nutrition and Physical Activity

- Riverside County Department of Public Health

#### Health Access, Utilization & Retention

- Catholic Charities
- Inland Empire Health Plan (IEHP) (2002 – 2015)

#### Oral Health

- Borrego Community Health Foundation
- Loma Linda University – School Sites
- Loma Linda University - Special Needs
- Nuviv USD
- Palo Verde USD

**Funded Agencies Extended Into 2011-2013**  
Previous Strategic Plan (2006/2007-2010/2011)

**EARLY CARE & EDUCATION PROGRAMS**

**AMOUNT ALLOCATED 2011/2013:**  
**\$11,829,597**

**Early Care Scholarships (2011-2013)**

- ABC Child Care Village Infant/Toddler Preschool Programs
- Bermuda Dunes Learning Center Infant Toddler/ Preschool Program
- Blindness Support Services
- California Family Life
- Coachella Valley Unified School District
- Escuela de La Raza Unida
- Family Services Association Infant Toddler/Preschool Program
- John F. Kennedy Memorial Foundation
- Martha's Village & Kitchen
- Murrieta Valley Unified School District
- Nuview Union School District (4 program: Infant/Toddler, Preschool and PAT)
- Palm Springs Unified School District
- Perris Elementary School District
- Riverside County Child Care Consortium
- Riverside County Office on Aging
- Temecula Valley Unified School District (Child Care and PAT programs)
- The Carolyn E. Wylie Center: Infant /Toddler/ Preschool programs
- VIP TOTS
- YMCA of Riverside County

**ALLOCATION: \$11,232,850**

**Child Care & Respite Coordination Services**  
**Grandparents Raising Grandchildren**

- Riverside County Office on Aging

**ALLOCATION: \$596,747**

**HEALTH AND COMMUNITY PROGRAMS**

**AMOUNT ALLOCATED 2011/2013:**  
**\$14,031,081**

**Breastfeeding Support Services 2011/2012**

- Parkview Community Hospital
- Riverside Community Hospital
- Hemet Valley Medical Center
- Riverside County Department of Public Health – Breastfeeding Services
- San Geronio Memorial Hospital

**ALLOCATION: \$1,100,358**

**Health Access, Utilization & Retention**

- Inland Empire Health Plan (IEHP)

**ALLOCATION: \$1,695,000**

**Home Visitation**  
**2011/2012**

- Riverside County Department of Public Health, Nurse Family Partnerships

**ALLOCATION: \$331,334**

**Mental Health Initiative**

- Riverside County Department of Mental Health
- Family Services Association
- Hershey Cause
- Riverside County Dept. of Public Health: Maternal & Family Services

**ALLOCATION: \$9,081,181**

**Oral Health**  
**2011/2012**

- Riverside County Regional Medical Center
- Palo Verde USD
- Borrego Health Foundation
- Loma Linda School of Dentistry

**ALLOCATION: \$1,823,208**

First 5 Riverside

# Strategic Plan

July 1, 2011 to June 30, 2016

Amended April 11, 2012  
Action Item: 12-10  
Adopted May 11, 2011  
Reso: 11-15



# First 5 Riverside Strategic Plan

## July 1, 2011 – June 30, 2016

---

### **Overview of Proposition 10**

In November 1998, California voters passed Proposition 10, the California Children and Families Act, which added a 50-cent tax on all tobacco products to fund health and early childhood development services that help establish a strong foundation for children's success in school and throughout their lives.

Funds from Proposition 10 are distributed to each of the 58 counties based on the number of births in that county. These funds are overseen by a local county commission that is responsible for developing a strategic plan to guide funding decisions that are consistent with the intent of Proposition 10.

Proposition 10 is based on a research which shows that the prenatal period and first 5 years of life is an exceptionally critical period for children's future development. During infancy and early childhood, children are flooded with new experiences that impact their brain development. The first 5 years of a child's life offer parents and caregivers a critically important opportunity to positively shape their child's growth and development.

### **First 5 Riverside**

First 5 Riverside, also known as the Riverside County Children & Families Commission, was created by the passage of Proposition 10. In 2009, First 5 Riverside became a division of the Department of Public Social Services. It is led by Commissioners, who are appointed by the Riverside County Board of Supervisors. The Commission decides how to use Riverside County's share of tobacco tax revenues received through Proposition 10 to prepare our youngest children and their families for success. Since inception, First 5 Riverside has invested more than \$200 million in local programs serving young children and their families.

### **Vision, Mission, and Guiding Principles**

#### *Vision*

All children in Riverside County are healthy and thrive in supportive, nurturing, and loving environments and enter school ready to learn and embrace lifelong learning.

#### *Mission*

First 5 Riverside invests in partnerships that deliver results in these areas: physical health, social-emotional health, cognitive development, a stable home environment, and schools that are prepared to nourish the development of entering kindergarteners.

## *Guiding Principles*

The work of the Commission is shaped by the following principles:

- Respect the social, cultural, and ethnic diversity of families and communities.
- Support access to services for all families in an environment of support and respect.
- Support and encourage outreach to geographically and socially isolated families.
- Support families to meet the developmental needs of their children.
- Provide appropriate services and support to children with disabilities and other special needs and their families.
- Support and encourage collaboration and leveraging opportunities among grantees.
- Support promising practices and evidenced-based models.
- Recognize and promote services and support for children ages 0 through 5 as the foundation for a lifetime of growth and success.

## **The Strategic Planning Process**

The Commission's existing Strategic Plan expires June 30, 2011. In August 2010, First 5 Riverside began a comprehensive strategic planning process to guide future community investments. As part of this process, there was an extensive review of the Commission's investments, financial plan, community data, and outcomes from previously funded efforts.

In addition to extensive Commission discussions, four public events were hosted for members of the public to provide input into First 5 Riverside's strategic planning process. These events were offered in the cities of Riverside and Cathedral City, with a total attendance of 173 participants representing more than 16 cities. This included parents and caregivers of children 0-5, service providers, and other members of the public.

In addition, 72 providers serving young children and their families completed a strategic planning anonymous online survey.

Upon a comprehensive review of all available materials, First 5 Riverside selected strategies to focus its investments in three areas: 1) Early Care and Education, 2) Health, and 3) Systems Change and Capacity Building. Serving children with special needs is a priority for the Commission across focus areas and implementation efforts specific to this population will be incorporated into all strategies.

## **Accountability & Evaluation**

### *Accountability*

First 5 Riverside is a responsible steward of public dollars. Organizations that receive First 5 funds report financial, program, and evaluation data in order to ensure compliance within their contractual guidelines. The fiscal reporting structure of the Commission complies with the structure developed by the Government Finance Officers Association of the United States and Canada (GFOA). First 5 Riverside

also has an extensive audit completed annually by an outside entity, which is reviewed and approved in a public hearing.

### *Evaluation Approach*

First 5 Riverside is committed to fund strategies that will make positive strides toward achieving the seven long-term objectives listed below. Progress is measured using the indicators listed in each focus area. This outcome-based funding approach enhances the Commission's ability to measure the impact of its program investments and make adjustments as needed.

#### Long-Term Objectives:

1. Increase access, affordability and quality of family and center-based early care and education.
2. Increase access, affordability and utilization of primary healthcare services for children 0-5.
3. Ensure that parents are utilizing age appropriate health and development information in their parenting practices.
4. Increase optimal birth outcomes (i.e. full term live births, normal birthweight).
5. Identify and treat children with special health and developmental needs as early as possible.
6. Ensure that parents and caregivers are knowledgeable about available community resources and programs.
7. Improve the safety and stability of children's home environments.

#### Indicators to Measure Progress:

The Commission will monitor and evaluate progress made toward the seven long-term objectives using a set of indicators found in each of the focus areas. Whenever possible, the Commission will use research-based indicators that evaluate how families served in First 5 Riverside programs are doing in comparison with available indicator data at a local, statewide, and national level.

## **Focus Areas: Early Care & Education, Health, and Systems Change & Capacity Building**

### *EARLY CARE & EDUCATION*

First 5 Riverside will focus its investments in early care and education strategies that emphasize the importance of parents ability to locate, afford, and utilize high quality child care as well as to educate parents and caregivers on ways they can promote optimal early childhood development in everyday practices. The Commission's investment approach focuses on two primary benefits for early care and education. First, research shows that high quality child care and preschool prepares children for success in school. Second, access to affordable early care and education allows parents to participate in the workforce and to further their own education.

#### **Rationale:**

A child's brain is 80% the size of an adult's brain at age three and 90% at age five.<sup>i</sup> Early experiences determine whether a child's developing brain architecture provides a strong or weak foundation for all future learning, behavior, and health.<sup>ii</sup> Participation in high quality early childhood programs can help

children prepare for school and is associated with better school performance.<sup>iii</sup> The quality of early childhood programs makes a difference in child outcomes. Programs with high-qualified staff and low staff turnover are associated with positive results for children. This effect is particularly strong in lower socio-economic environments and helps to close the well documented “school readiness gap”, which describes the gap in readiness when comparing lower income children to other children upon kindergarten entry.

## **Early Care and Education Strategies for Investment:**

### *I. The Commission’s Primary Emphasis for Early Care and Education investments include:*

**Quality Workforce:** Promote quality in early care and education settings by providing incentives to early care providers (0-5) for college level units achieved toward progress on AA, BA, MA degree attainment in child development or other closely related field, as well as other First 5 approved professional development coursework or workshops; early care mentorships and reflective practice groups; training that improves the interactions of providers with children including competencies such as social-emotional, cognitive development and overall school readiness.

**Quality Availability:** Provide quality enhancement operational support to part and full day early care settings serving children 0-5 focused on raising the quality of the program and integrating health, parent education, developmental screenings, and linkages with the community collaborative. *This funding would not provide support for base level licensed care, rather the “quality-added.”*

### *II. The Commission’s Secondary Emphasis for Early Care and Education investments include:*

**Early Care Scholarships:** Early care scholarships to families based upon a sliding scale structure with the top limit at 300% Federal Poverty Level (mirroring Healthy Kids insurance), in quality family or center-based programs.

**Quality Physical Settings:** Provide capital support for center and family based early care settings (0-5) to improve the physical environment promoting health, safety, and overall quality. This strategy will utilize standardized environmental rating scales of indoor and outdoor areas to guide investments and focus on areas in most need. This funding is intended for licensed providers already meeting basic health and safety standards.

**Parent Education:** Evidence-based child development based parent education series.

### *III. Investments which may be implemented as pilot projects or with specific targets include:*

**Comprehensive Early Care Services and Supports to Families in Crisis:** Support the provision of high quality early care and education for children 0-5 and comprehensive wrap around services including respite care. Targeted to children who are living in shelters for the homeless, including displacement due to domestic violence; grandparents raising grandchildren; pregnant and parenting teenagers; and families living in crisis.

**Evidence Based Home Visiting:** School readiness home visitation targeted to low performing elementary school zones and geographically isolated families.

**Quality Care for Children with Special Needs:** Support the provision of quality care for families with children who have special health, developmental, or social-emotional needs.

### **Indicators to Measure Progress of Commission Strategies:**

- Number of children benefiting from high quality early care with First 5 scholarship support
- Percent of children ages 3-4 who attend a preschool program at least 10 hours per week
- Number of early care providers receiving First 5 workforce incentives who earn an Associates, Bachelors, or Masters degree in child development
- Percent of teenaged parents who graduate high school or complete their G.E.D. while participating in First 5 funded programs
- Number of children attending early care settings that are participating in quality enhancements
- Number of providers participating in formal education and professional growth opportunities funded by First 5 Riverside
- Early care and education settings that receive a score of 5 or above on an independently administered early childhood environmental rating assessment
- Number of Riverside County child care centers accredited by the National Association for the Education of Young Children
- Number of Riverside County child care homes accredited by the National Association for the Family and Child Care
- Percent of children who are read to regularly by family members
- Percent of children who have family members regularly play music or sing songs with them
- Number of children screened for developmental delays and behavioral needs

### **HEALTH**

First 5 Riverside will focus the majority of its health investments by increasing access to and appropriate utilization of health services, early intervention, and promoting optimal health through a combination of parent and caregiver education.

#### **Rationale:**

A child's health is fundamental to their ability to be successful in school. The basic principles of neuroscience illustrate that providing favorable conditions for healthy development in early childhood is likely to be more effective than treating problems at a later age.<sup>iv</sup> Well-baby and well-child health focus on prevention and promote child health by reducing the incidence of illnesses and general health problems. Providing access to affordable health services, including mental health services, is one of the most effective policies available for reducing perinatal and early childhood health impairments.<sup>v</sup>

#### **Health Strategies for Investment:**

*I. The Commission's Primary Emphasis for Health investments include:*

**Health Access:** Fund enrollment and Healthy Kids health insurance premiums for children 0-5.

**Health Optimization:** Support strategies that increase the efficient and appropriate utilization of health care (have insurance, get immunized, medical home, well child check-ups, etc.) with emphasis on prevention and early intervention.

**Oral Health:** Child, parent and caregiver education focused on prevention of oral health disease; screening and treatment including establishing a dental home for uninsured and underinsured children 0-5.

**Mental Health:** Services for parents and caregivers of children 0-5 include: family counseling; evidence based education and skill development that promotes positive social and emotional health; post-partum depression services; and referrals and linkages to existing services. Services to children ages 0-5 include: screening, assessment and treatment services for children with, or at high risk for developing, behavioral and other mental health disorders.

II. *The Commission's Secondary Emphasis for Health investments include:*

**Asthma Management:** Parent and caregiver education aimed at identifying the signs of an asthma episode, reducing asthma triggers, asthma medication management, and treatment utilizing primary physicians.

**Nutrition:** Breastfeeding education and support; parent and caregiver education; advocacy for policies and practices that promote optimal nutrition for children 0-5 and their families.

**Physical Activity:** Advocate for physical environments that promote age appropriate physical activity for children 0-5; civic, parent and caregiver education, curricula and related resources.

III. *Investments which may be implemented as pilot projects or with specific targets include:*

**Targeted Home Visitation:** Evidence-based programs to support optimal birth outcomes and improve maternal and child health development. These programs will also include screenings to identify special needs, post partum depression, and home safety.

**Special Needs:** Programs and services for those with greatly increased risk for special health or developmental needs such as babies born prematurely, with low birthweight, or alcohol/drug exposed. Prevention based services such as preconception and prenatal health education.

**Indicators to Measure Progress of Commission Strategies:**

- Percent of children 0-5 with health insurance
- Percent of children, by age, who have received the American Academy of Pediatrics (AAP) recommended schedule of well child exams
- Percent of children 2-5 who have received oral health exam in the past year
- Percent of children receiving immunizations per the AAP recommended schedule
- Percent of children receiving developmental and social-emotional screenings per the AAP recommended schedule
- Children receiving developmental and/or behavioral health support services as a result of a referral from a screening
- Percent of babies exclusively breastfed at hospital discharge
- Percent of parents reporting their children are in good or excellent health
- Percent of women receiving early prenatal care
- Percent of babies born with low birthweight
- Percent of pre-term births

- Rate of asthma hospitalizations for children 0-4
- Time spent by children ages 1-5 on an average weekday watching television or videos
- Percent of children 2-5 who eat 5 or more servings of fruit or vegetables every day
- Number of visits from 0-5 children to Emergency Departments and Urgent Care Clinics needing nebulizer treatments
- Number of parents receiving psycho-social screenings for depression, substance abuse, and other risk factors, who are referred for treatment for depression and other family risk factors

### *SYSTEMS CHANGE & CAPACITY BUILDING*

First 5 Riverside is dedicating effort and resources towards making long-term and sustainable change in Riverside County that supports the healthy development of young children and their families. This includes an emphasis on leveraging other funds, improving the sustainability of programs and organizations serving young children, and other partnerships with public and private entities serving young children and their families regardless of whether that entity is currently funded by First 5 Riverside.

#### **Rationale:**

The Commission’s commitment to systems change and capacity building is based on two long-term benefits to the community. First, as Proposition 10 funds continue to decline over time, it is important for the Commission’s efforts on behalf of children be maintained by service providers with the capacity to develop and implement an effective and diversely funded sustainability plan. Additionally, one of the primary written goals of Proposition 10 is to create a comprehensive and integrated service system for young children and their families. First 5 Riverside is committed to achieving this goal to the greatest degree possible through a strategic use of funds and resources.

#### **Systems Change and Capacity Building Goals and Strategies for Investment**

The goals and strategies listed below include expectations for the Commission’s own internal workings as well as strategies aimed to benefit all families with young children residing in Riverside County. The Commission will dedicate and direct resources to ensure that progress toward systems change and capacity building goals are well-planned, realistic, and are responsive to the needs of young children and families in Riverside County.

*The Commission is committed to ensuring the following internal goals are achieved:*

- **Integration** – The Commission will ensure that efforts across strategic plan focus areas are coordinated to prevent duplication and maximize resources.
- **Accountability & Evaluation** – The Commission is committed to transparent conduct of business and to abide by relevant and appropriate financial, business and operational practices, policies and regulations in the conduct of its business. The Commission will measure the impact of First 5 investments and communicate these outcomes to the public.
- **Education** – The Commission will integrate knowledge of early childhood research and best practices within all First 5 efforts. Among other topics, this includes furthering knowledge of the dangers of tobacco on the health and development of young children.

*The Commission will serve as a catalyst, convener, and funder to work in partnership with others to:*

**Coordinated Service Delivery:** Promote cross-agency coordination and communication among grantees and other providers of service of children 0-5 and their families. Encourage co-location of services when expedient, coordinated case management as appropriate, and a follow up of referrals to ensure that families are getting connected to needed services.

**Early Childhood Advocacy:** Support early childhood policies and practices that promote overall optimal school readiness. For example, the Commission will work to ensure that the needs of young children and their families are incorporated into county, city, and regional planning efforts such as the development of master plans.

**Sustainability:** Promote fund development including public funds leveraging by those that serve children 0-5 in Riverside County.

**Awareness of Services:** Ensure that families with young children are knowledgeable about existing services and supports.

**Training and Technical Assistance:** Provide capacity building support aimed at increasing quality of services delivered to young children and their families as well as raising the capacity of those organizations to deliver and sustain services.

**Public Education:** Raise awareness about the critical nature of the first 5 years of life and deliver public education directly tied to strategic plan strategies.

The goals and strategies in the Systems Change and Capacity Building focus area will be directly addressed by the Commission. The Commission may chose to enter into professional service or other contracts to support the Commission and its staff to accomplish these goals.

#### **Indicators to Measure Progress of Commission Strategies:**

- Percent of funded agencies that are leveraging public funding
- Number of funded agencies providing co-located services
- Number of funded agencies with expanded service hours or with flexible schedules
- Number of agencies participating in First 5 Riverside sponsored trainings/workshops designed to enhance community services
- Community members are knowledgeable about importance of a child's first five years
- Parents report that they are aware of existing services and programs for children 0-5
- Policies and practices have been adopted which promote early childhood health and development

## **Conclusion**

The First 5 Riverside 2011-2016 Strategic Plan will be used to guide all policies, investments, and activities of the Commission and its staff. It will be evaluated annually to assess whether progress is being made toward the seven long-term objectives using the progress indicators. The plan reflects the needs identified by the stakeholders participating in public meetings, the community needs assessment,



and literature review of best practices. First 5 Riverside recognizes partnership with other entities in the community is critical toward achieving success for children 0-5 and those that care for them.

---

<sup>i</sup> Zero to Three: National Center for Infants, Toddlers and Families. Washington, DC <http://www.zerotothree.org>

<sup>ii</sup> Center on the Developing Child at Harvard University (2007). *A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children*.  
<http://www.developingchild.harvard.edu>

<sup>iii</sup> Schorr, L., and Marchand, V. (2007). "Pathway for Children Ready for School and Succeeding at Third Grade." Harvard University. Cambridge, MA.

<sup>iv</sup> Center on the Developing Child at Harvard University (2007). *A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children*.  
<http://www.developingchild.harvard.edu>

<sup>v</sup> 19 Carroli, G., Villar, J., Piaggio, G., Khan-Neelofur, D., Gülmezoglu, M. Mugford, M., et al. (2001). WHO systematic review of randomised controlled trials of routine antenatal care. *The Lancet*, 357(9268), 1565-1570.