

FIRST 5 COMMISSION OF SAN DIEGO COUNTY STRATEGIC PLAN 2015-2020

KEY FINDINGS: NEEDS ASSESSMENT

February 11, 2014

As First 5 San Diego (F5SD) develops the Strategic Plan 2015-2020, it is important to have a clear understanding of the current context. F5SD revenue projections indicate significant declines over the next five years. By direction of the F5SD Commissioners, the focus and scale of its investments must narrow within the existing strategic framework of goals and strategies, but also maximize its impact in service delivery and strengthening systems for young children. This summary provides key findings from research available related to young children's health, early childhood education, parent and family development, and community capacity building in San Diego County. Also included is input from key informants and research on best practices.

POPULATION

- The San Diego region's steady population growth will continue in the decades ahead--increasing 12.5% from 2012 to 2020—and will continue to become increasingly diverse.
- From 2012 to 2020, the county's rate of growth of children ages 0-5 (22.0%) will outpace the overall county population (12.5%).

HEALTH

Health Status

- In the past decade, the County experienced improvements in maternal and child health through reduction in infant mortality rates (from 5.9% in 2000; to 4.4% in 2011), live births to girls ages 15-17 (from 3.0% in 2000; to 1.8% in 2011), and the number of infants born preterm (from 10.6% in 2000; to 9.1% in 2011).
 - No improvement occurred in the percentage of mothers receiving early prenatal care (83% in 2000 and 2011) and infants born at low birth weight (6.0% in 2000; 6.5% in 2011).
- The general health status of children ages 0-5 improved as measured by the increase in the total percentage of "excellent," "very good" and "good" levels (95.3% in 2001; 98% in 2011).
- Key areas of F5SD investment include:

- Home visitation program: improving pregnancy outcomes and parenting practices;
- San Diego County Childhood Obesity Initiative: reducing and preventing obesity through the “5210 Every Day” initiative.

Healthcare Access

- Overall, the rate of children ages 0-5 currently insured in San Diego County increased in the past decade (from 91.9% in 2001; to 94.6% in 2011).

Oral Health

- Children ages 0-5 visited a dentist more regularly (58.6% in 2009 and 62.9% in 2011 visited a dentist 6 months ago or less), while fewer children had never visited a dentist a decrease of 12.4% (from 29.6% in 2009; to 17.2% in 2011).
- F5SD invests in:
 - Oral Health Initiative: providing screenings and treatment to children and pregnant women, and education for health care professionals; and
 - Water fluoridation through three municipal water agencies that serve approximately 130,000 of the county’s children ages 0-5.

Behavioral Health and Social Emotional Health

- In the past decade, public funding has grown for mental health services, with F5SD funding the county’s largest program for young children: Healthy Development Services (HDS). Combined with F5SD-funded KidSTART, these programs have increased the percentage of children:
 - with concerns who demonstrate gains in at least one developmental domain (67.6% in 2011; 85.8% in 2013); and
 - whose early childhood education teachers received consultation services and showed an increase in protective factors or a decrease in behavioral concerns (77.9% in 2012; 96.1% in 2013).
- With increased screenings the percentage of children identified with special needs has also increased (19.8% in 2009; 35.4% in 2013).

LEARNING

- The percentage of children ages 3-4 who are enrolled in preschool fluctuated in the past decade (45.2% in 2005; 51.0% in 2009; 49.4% in 2012).
- F5SD funds two learning programs—QPI and Mi Escuelita Therapeutic Preschool—to provide quality preschool, and consultations and training for early childhood education (ECE) staff on social-emotional development and children’s behavioral challenges.
 - 97.2% of children demonstrated improvement in 4 developmental areas; and
 - 10.9% of children were identified with special needs.
- F5SD also funds ECE teachers’ professional development to support high quality instruction, which is linked to greater language and literacy gains of children in the classroom.

FAMILY

- In recent years, an increased percentage of children ages 0-11 in San Diego County live between 0-99% of the federal poverty level (FPL) (16.7% in 2009; 29.1% in 2011), with the highest concentration level in HHSA's Central region (28.1% in 2009; 68.5% in 2011).
- F5SD increased parents' skills, comprehensive support and services for child development and school readiness between fiscal years 2011-12 and 2012-13 by:
 - increasing the number of children and parents/caregivers who received care coordination services by 19%; and
 - increasing the number of children served by 2-1-1 San Diego by 158%.
- Among parents who participated in specific F5SD programs:
 - 68.7% of parents who attended at least one QPI parent education class reported increased use of positive parenting practices to affect child behavior; and
 - 93.6% of parents involved in HDS and KidSTART parent education reported an increased knowledge and capacity to advocate for their child's needs.

COMMUNITY

- F5SD implements strategies that contribute to broad, systems-level change that supports the long-term viability of programs and organizations that support early childhood development by:
 - aligning existing service delivery systems to create more efficient, family-focused networks; and
 - educating the public about the importance of the first five years of life.
- By linking with the *Live Well San Diego* initiative, F5SD leverages investments in Information and Referral Services, Parent and Community Education, the Childhood Obesity Initiative, Capital Projects, and the "Good Start" campaign.

KEY INFORMANTS INPUT

The purpose of the interviews was to identify emerging issue areas, policy developments and trends, innovative and collaborative funding models, and best practices in serving the needs of young children and their families. Key trends and emerging issue areas identified by informants include the following:

- Implementing the Affordable Care Act into existing systems of care
- Identifying ways to expand and bolster the sustainability and quality of early childhood education
- Increasing support for young children of military families and new veterans
- Integrating trauma-informed care to existing systems
- Strengthening families' use of protective factors to enhance children development and reduce children abuse and neglect

Opportunity areas identified by informants include the following:

- Leveraging the Affordable Care Act for things such as strengthening home visitation programs, and increasing preventative services
- Strengthening partnerships with the Department of Defense to coordinate services for military dependents and veterans
- Engaging the emerging framework for trauma-informed care to link to and support ECE and developmental screening systems
- Expanding efforts to strengthen networks and communications among service providers
- Increasing the focus on developing families' strengths and protective factors
- Exploring new partnerships and leveraging opportunities at the local level among public, private and philanthropic organizations

BEST PRACTICES

MIG conducted research into best practices that represent innovative and effective approaches, are closely linked to F5SD's existing strategies, and support superior service delivery.

- **Transitional Kindergarten (TK):** Created by the California Kindergarten Readiness Act in 2010, TK offers children born in the Fall with developmentally appropriate curriculum aligned with kindergarten standards. Taught by credentialed teachers from K-12, TK ensures that children have pivotal, foundational skills for successful learning when they begin kindergarten.
- **Integrated Social and Developmental Services:** These services support supports families, child health care, early care and education, and human service providers in recognizing early signs of developmental or behavioral concerns of young children. Additionally, this approach assists in reducing the confusion around finding programs, and building collaboration across all sectors that serve young children and families.
- **Protective Factors and Family Strengths:** Enhancing child development and reducing child abuse and neglect can be addressed through developing families' strengths and protective factors including parental resilience, social connections, and knowledge of parenting and child development.
- **Family Navigation:** For families of children with special healthcare needs and disabilities, a unique approach to providing support and services is through other families who have first-hand experience navigating the maze of health care services and programs.
- **Home Visitation:** As exemplified by local evidence-based efforts (Nurse-Family Partnership and Black Infant Health Program), these programs generally focus on maternal and early childhood health, fostering long-term success for first-time moms, their babies, and society.
- **Systems Change:** Policy changes at the local, state and federal levels can address system barriers to the well-being of young children, focusing on additional service integration for better, more efficient, more cost-effective and more impactful benefits to children and families.

RECOMMENDATIONS

Finally based on the comprehensive review of the available data and outcomes to date, MIG offers the following recommendations in conducting the strategic plan update.

- 1. Maintain the Over-Arching Strategic Framework:** The existing framework is widely accepted by the community as framing F5SD's role in serving the needs of children ages 0-5 and their families. When pairing F5SD's diminishing resources with its proven track record of positive impacts on children's well-being, the framework is an enduring and relevant structure for guiding future progress.
- 2. Narrow the Scope to Align with Funding Projections:** While the existing framework is relevant, the breadth of its reach exceeds current and projected funding levels. Tough choices must be made to reduce investment levels, at least at the indicators level in the near-term. Deeper cuts to existing strategies and objectives may be necessary for the 3-5 year horizon.
- 3. Apply Consistent Criteria to Decision-Making:** The strategy development and selection process during to the 2010 strategic plan update applied a set of tiered criteria that facilitated a rigorous and thoughtful decision-making process. Utilize the same criteria—possibly with minor refinements—as an important filter to ensure that strategies truly contribute to achieving the vision and goals, and providing meaningful results. This includes the process for funding Emerging Critical Needs initiatives.
- 4. Expand Leveraging Opportunities to Promote Sustainability:** With clearly diminishing F5SD resources, leveraging partnerships and other funding sources is more important than ever. F5SD must look for new innovative ideas that could include cross-sector partners and a network approach.