

# Relationships at the Center of Change:

Outcomes of F5MC's  
Investments in Fiscal Year 22.23





# TOTAL PEOPLE SERVED IN FISCAL YEAR 2022-2023

Total children, caregivers and practitioners served

20,038

12,392

Total children 0-5



136

Total children 6+



5,735

Total primary caregivers



1,775

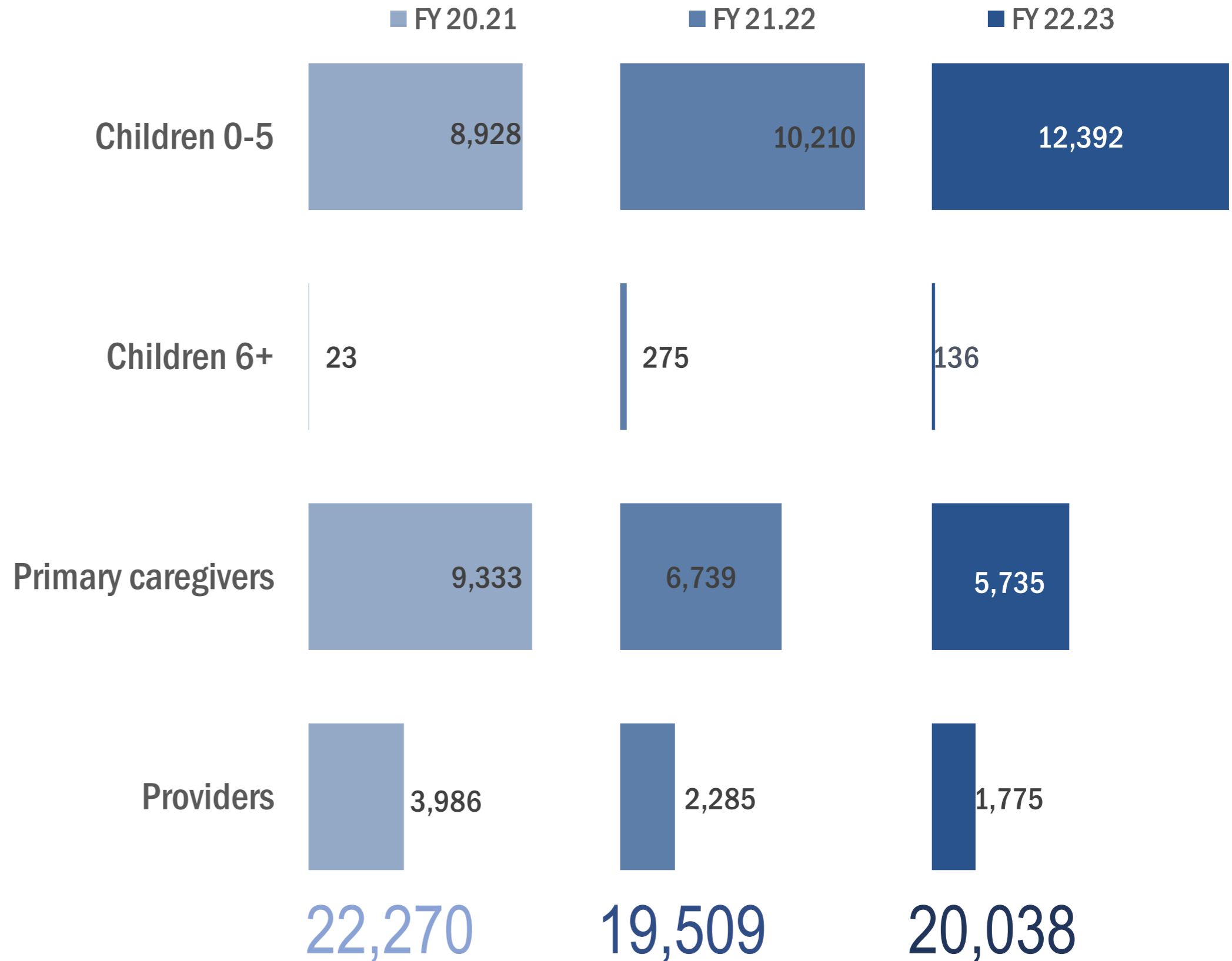
Total practitioners, providers and educators



# TOTAL PEOPLE SERVED: FISCAL YEAR COMPARISONS

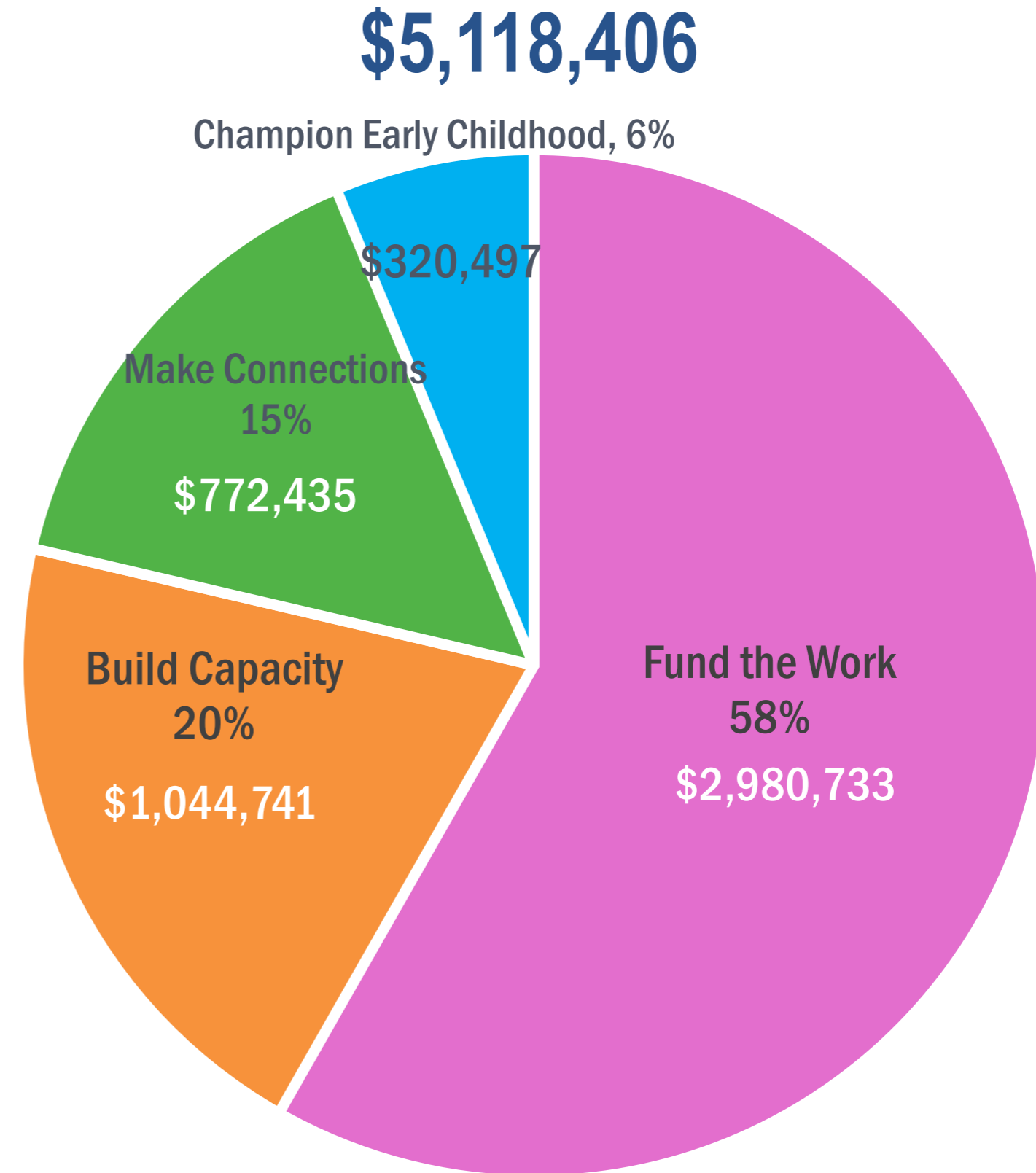
## Comparing People Served Across Fiscal Years

F5MC served slightly more people in FY 22.23 than FY21.22 but slightly fewer people than FY 20.21. The differences in children and parents are explained by quantity and type of supply distributions. For example, in FY 22.23, more children were served via diaper distributions than the past two fiscal years. There were more primary caregivers served through activities like shelter in play kit distributions in FY 20.21 than FY 22.23

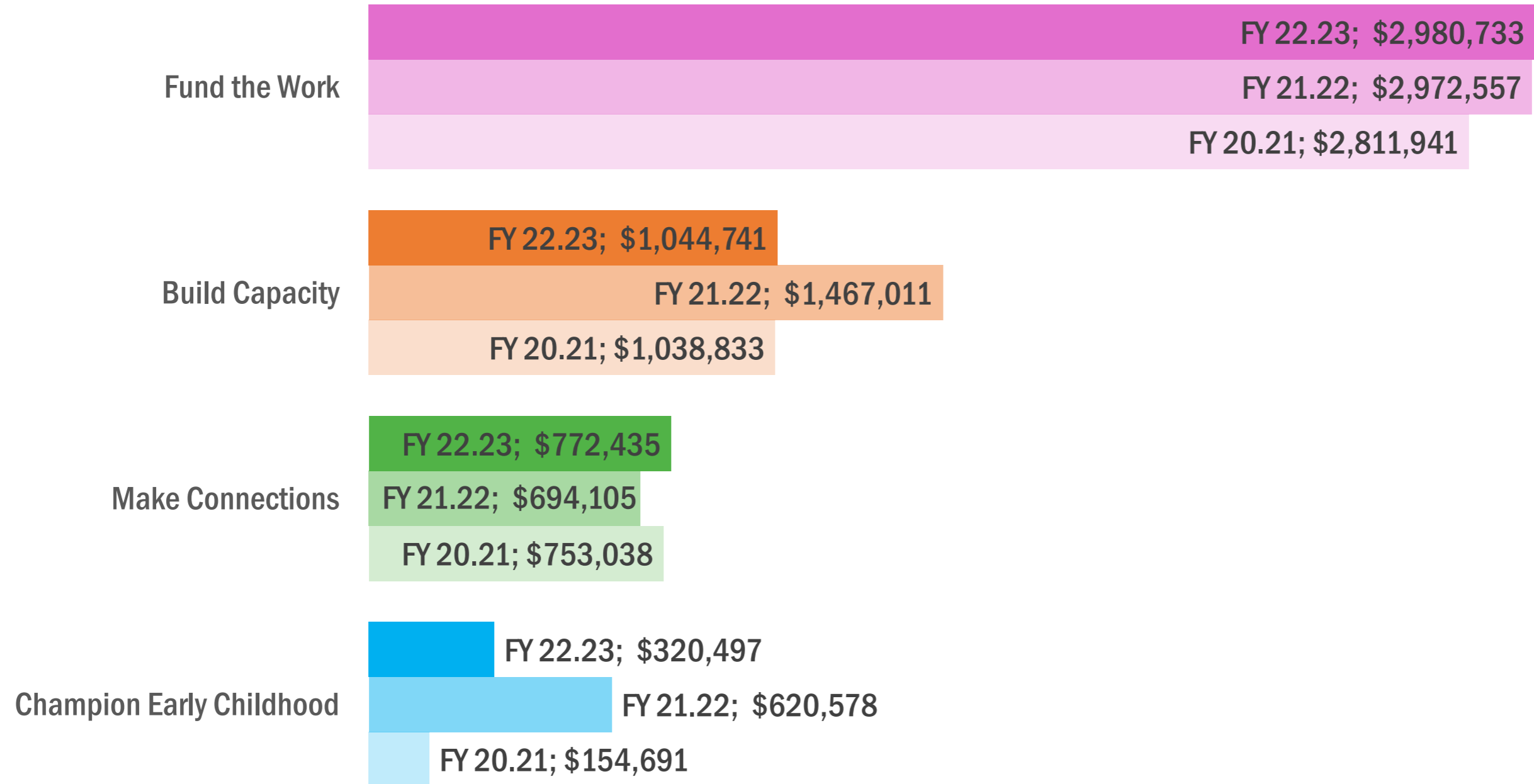


# EXPENDITURES BY CORE ROLE IN FISCAL YEAR 2022-2023

In FY 22.23, F5MC expended **\$5,118,406** across the four Programmatic Core Role areas. More than **one-half (58%)** of this was expended on **Fund the Work** programs.



# EXPENDITURES BY CORE ROLE: FISCAL YEAR COMPARISONS



# ACTIVITIES AND PEOPLE SERVED ACROSS FOUR CORE ROLES



**Champion Early Childhood**



**Make Connections**



**Build Capacity**

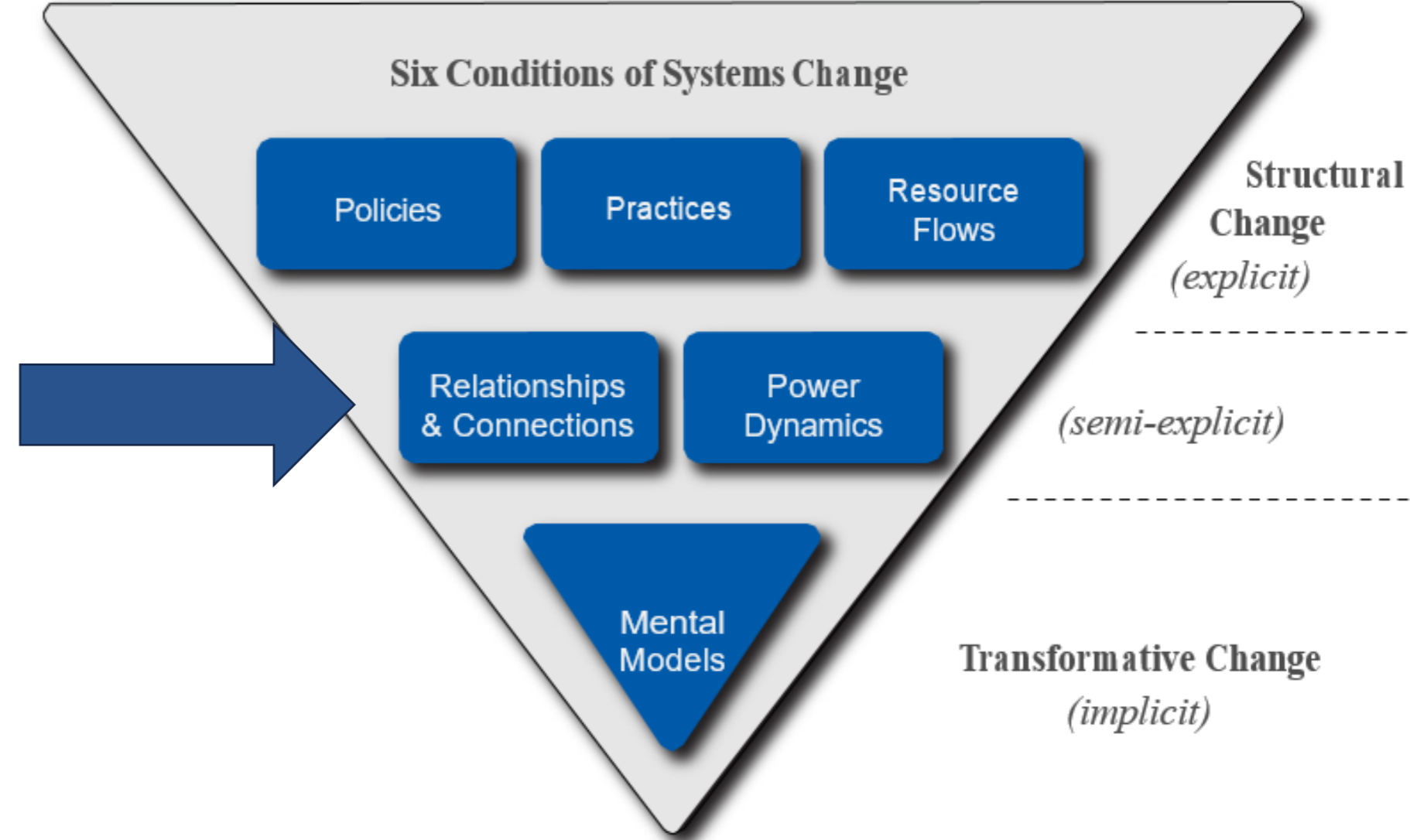


**Fund the Work**

# Relationships and Systems Change

This report highlights the activities across the core roles that build and change relationships. According to Milligan, Zerda & Kania (2022), systems change work is relational work. They discuss the importance of deep relational work as “a fundamentally different way of being in relationship. This starts with creating space for the work that is viewed by all, especially those who do not have institutional power, as a safe environment where participants can express themselves freely and be vulnerable, and to create the conditions that encourage those in power, such as funders and board members, to do the same.<sup>1</sup>”

*Systems change is about shifting the conditions that are holding the problem in place.*  
*(Content: John Kania (FSG) and Social Innovation)*





## Relationships and Systems Change

Relationships form a cascade of parallel process<sup>2</sup>

The way that governments relate to services

parallels the way that services relate to communities

that parallels the way that managers relate to staff

that parallels the way that staff relate to parents

that parallels the way parents relate to children

# SECTION I



## Champion Early Childhood

**STRATEGY: Advocate for Policies and Communicate Strategically**

## Theory of Change:

Partners engage in more frequent, structured and effective communication

Organizations and community members have greater alignment of strategies for change



Services for families with young children demonstrate higher levels of quality

Quality services are more accessible to families with young children

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## State and Federal Policy/Advocacy

**\$152,885** expended on Policy/Advocacy in FY 22.23

**3%** of all Programmatic Core Role expenditures

### Central Coast Early Childhood Advocacy

**Network (CCECAN):** CCECAN builds bridges across Monterey, Santa Cruz and San Benito counties to catalyze parent leadership, regional partnerships and a growing movement for the policies and systems all children deserve. This tri-county collaboration represents over 94,000 children.



**In FY 22.23**

**560** Members on the CCECAN roster

**147** Members participated in FY 22.23 activities (see next two slides)

**50%** Of CCECAN members represent Monterey County (out of those whose home county is known)

## Activities FY 22.23

**Parent Power Summit:** Connects parent leaders and advocates, sparks conversations and provides public communication training.

**Policy Learning Community:** Created to build parents' understanding of the legislative process. The learning sessions centered around building community power, how a bill becomes a law, crafting personal stories and preparing for visits with regional state legislators.

**Advocacy Workshop:** Participants learned about the redistricting process, their current Central Coast state and federal representatives and strategies for building relationships with elected representatives.

## Numbers served 22.23

**76** Parents and other early childhood advocates participated in the Parent Power Summit

**52** Parent leaders participated in the Policy Learning Community cohort.

**27** Parent and community advocates attended the Advocacy workshop

## Key Highlights from the FY 22.23 Parent Power Summit:

- 85%** Of participants strengthened their relationship with other parents
- 89%** Of participants felt the Summit helped them see the importance of using their knowledge and experiences to help improve services in their community
- 98%** Of participants felt the Summit inspired them to take at least one new action in support of their community



Invitav y motivar a otros padres a que participen en este tipo de eventos y en sus escuelas para que sean escuchados.

*Translation : "invite and motivate other parents to participate in these types of events and in their schools so they can be heard"*

- Parent Power Summit Attendee

## Key Highlights from Policy Learning Community:

The Policy Learning Community Increased Skills and Confidence to Participate in the Legislative Process

- 87%** Of participants increased their understanding of how a bill becomes a law
- 83%** Of participants gained confidence speaking in support of a bill
- 83%** Of participants increased their understanding of how to tell a good story
- 77%** Of participants gained confidence sharing their story with a representative





## Activities FY 22.23

**Legislative Meeting with Congressman Panetta:** CCEAN hosted a legislative visit with Congressman Panetta to discuss supporting the Network’s priorities—child care, mental health, housing and early childhood programs.

**Legislative Meeting with Congresswoman Lofgren:** CCECAN hosted a meet and greet with Congresswoman Lofgren, which included stories from CCECAN parents.

**Legislative Meetings with State Representatives:** CCECAN hosted five legislative visits with all local state representatives to discuss increased support for child care, mental health, housing, and early childhood programs.

**42** CCECAN members attended the Panetta legislative visit

**10** CCECAN members attended the meet and greet

**58** CCECAN members attended at least one legislative visit

## Activities FY 22.23

**Letters of Support to State Legislators:** F5MC, along with CCECAN, sent letters to state legislators advocating for support of childcare funding and rate reform, childcare wages, economic supports for parents, and paid sick leave.

### Policy Advocacy Support Examples:

- **SB616 Paid Sick Days:** increase the amount of paid sick leave an employer is required to provide an employee from three to seven.
- **Budget advocacy:** Child care fee rate reform and higher wages for the child care workforce.
- **AB 326 MHSA Modernization:** No set-aside for children 0-5; however, there was additional language inserted into the legislation that included 0-5.

**7** Letters of support and other communications taken in support of legislative actions. Additionally, more intensive advocacy efforts such as creating talking points, conducting legislative visits, and traveling to Sacramento were taken for budget advocacy and MHSA modernization.

**4** Items supported by F5MC, CCECAN, and/or F5AC were passed.

Communications: Outreach/Sponsorship

**\$167,612** Expended in FY 22.23

**3%** of all Programmatic Core Role expenditures

### Numbers served 22.23

**The Kit for New Parents:** F5MC distributes the Kit to new and expecting parents, which includes educational materials on child health and development. The Kit is distributed by local partner organizations, including family resource centers, hospitals, clinics and other community partners.

**3,223** Kits distributed to new parents in FY 22.23. This represents 56% of Monterey County births (2022 birth data).

**Dollars and Sense – Investing in Early Childhood with Nobel Laureate Economist Professor James Heckman:** Professor Heckman presented his latest research on the high return on investment of quality early childhood programs.

**205** Community members attended the event with Dr. James Heckman

## Communications: Outreach/Sponsorship (continued)

Numbers served 22.23

**Vaccine clinic at MY Museum:** F5MC sponsored the Wheelie Mobilee to attend events to encourage young children to get vaccinated. F5MC also supported MY Museum to host a vaccine clinic at their Monterey location.

**57** Children vaccinated

**SupplyBank and Baby2Baby Diaper and Emergency Supply Distribution:** SupplyBank.org received a grant from the Community Foundation's Flood Relief Fund to secure diapers for Monterey County Residents. F5MC was included in the grant to handle coordination of distribution with local parents. Additionally, staff facilitated connections with SupplyBank.org, Baby2Baby, and disaster support staff, including members of the County Emergency Office, Second Harvest Food Bank and All in Monterey to support the provision of supplies for families in Pajaro and South County.

**7,199** Children and parents served through supply distributions

**Emergency care coordination:** Funding for Positive Discipline Community Resources to provide emergency care coordination and support to Pajaro families.

**410** Children and parents supported

# SECTION II



## Make Connections

**STRATEGY: Mobilize People and Resources**

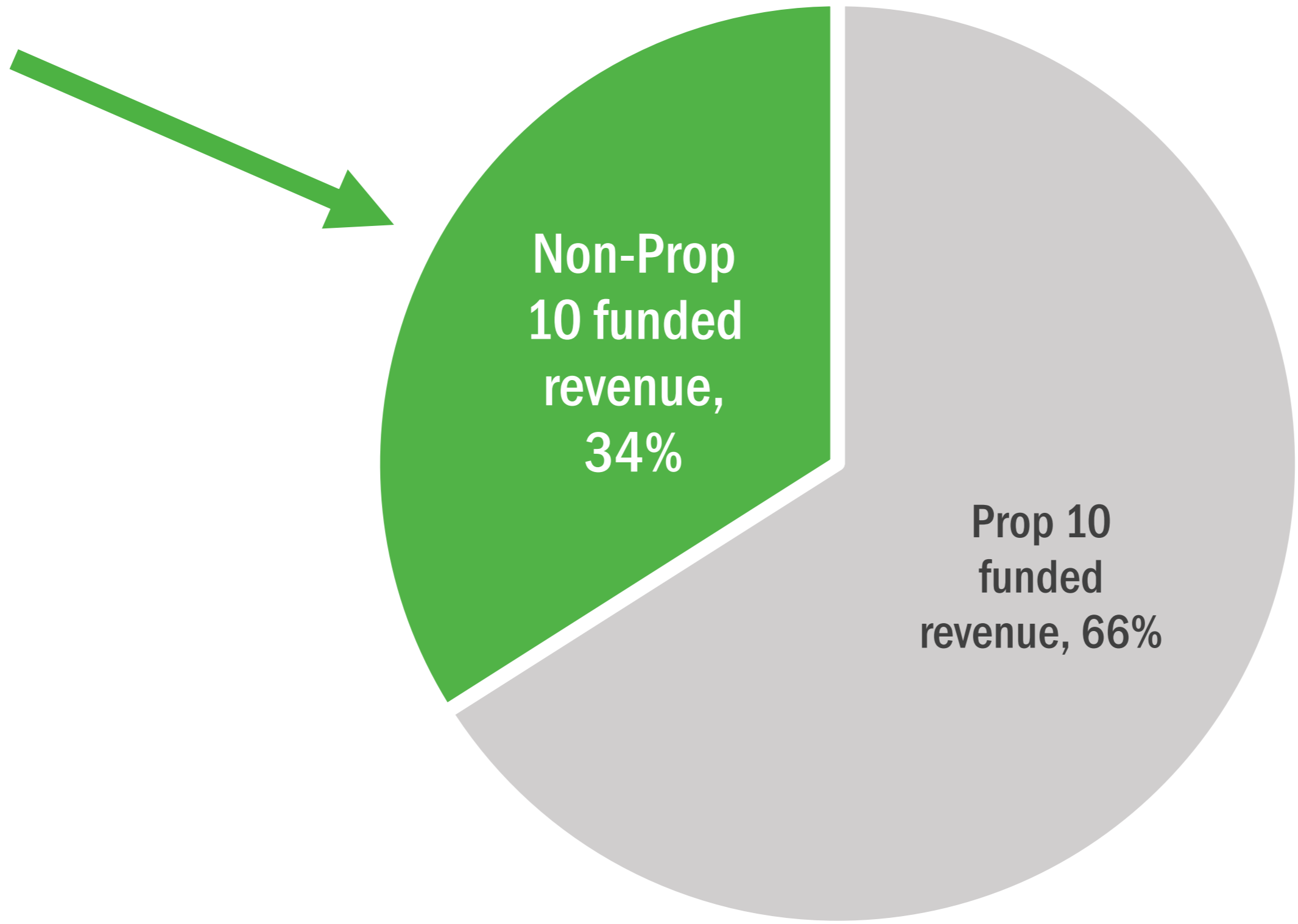
# Make Connections / Develop Funds

## Grants/Donations to F5MC FY 22.23

Grant/Funding Source	Amount in FY 22.23	
<b>Tobacco Tax Funds</b>	<b>\$3,545,791</b>	
<b>Monterey County DSS Home Visiting</b>	<b>\$590,101</b>	
<b>First 5 Dual Language Learner Grant</b>	<b>\$389,755</b>	
<b>Monterey Peninsula Foundation</b>	<b>\$375,000</b>	
<b>Packard - F5MC Grant</b>	<b>\$250,000</b>	
<b>First 5 Impact Funds</b>	<b>\$232,223</b>	
<b>Bay Area/Other Local Funders</b>	<b>\$229,692</b>	
<b>All in for Kids Grant</b>	<b>\$200,000</b>	
<b>MCHD - Bright Beginnings Grant</b>	<b>\$150,000</b>	
<b>Other</b> (interest, SMIF, capitalized lease, uncategorized)	<b>\$128,174</b>	
<b>Monterey County-MHSA Grant</b>	<b>\$100,000</b>	
<b>Bright Beginnings Grants - Other</b>	<b>\$99,857</b>	
<b>F5CA-Home Visiting</b>	<b>\$60,468</b>	
<b>MAA</b> (7 F5MC staff report MAA related activities on a monthly basis)	<b>\$36,671</b>	
<b>Event Tickets/Sponsorship Income</b>	<b>\$17,120</b>	
<b>Private donors</b>	<b>\$50</b>	

# Make Connections / Develop Funds

Grants/Donations to F5MC FY 22.23



**COMIENZOS  
BRILLANTES**  
INICIATIVA PARA PROMOVER EL DESARROLLO INFANTIL

**BRIGHT  
BEGINNINGS**  
EARLY CHILDHOOD DEVELOPMENT INITIATIVE

**\$767,435** expended on Bright Beginnings in FY 22.23

**15%** of all Programmatic Core Role expenditures

### **Bright Beginnings Early Childhood Initiative:**

The Bright Beginnings Early Childhood Initiative is a countywide approach to ensuring all young children and their families have what they need to succeed in school and life. It uses a collective impact approach for systems transformation, facilitation collaboration in areas such as: perinatal health, child care and early education, family friendly business, and community-based advocacy. It is an initiative of the Monterey County Children's Council, and fiscally hosted by F5MC.



### **In FY 22.23**

- Connected cross-sector, multi-discipline leaders across 8 affinity networks and their subcommittees including VIDA reflective practice circles
- Distributed three newsletters: The Early Learning Digest, The Maternal Mental health Newsletter, and the Bright Beginnings Initiative Newsletter
- Engaged in advocacy to support increased awareness of and investment in early childhood.
- Participated in economic development spaces to champion the role of early childhood in building a thriving Monterey County.



# SECTION III



## Build Capacity

**STRATEGY: Build Organizational and Practitioner Capacity**

## Theory of Change:

Partners engage in more frequent, structured and effective communication

Services for families with young children demonstrate higher levels of quality / coordination

Quality services are more accessible to families with young children



Families are able to navigate services more effectively

Families receive more cohesive services for their needs

## Theory of Change:

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Families are able to navigate services more effectively

Families receive more cohesive services for their needs

## Theory of Change: Relationships at the Center of Quality Services

Research shows that “the most critical dimensions of early interventions is the relationship between the program and the participants. The benefits of program services will not be fully realized unless the participant is genuinely engaged<sup>3</sup>.”

“Relationships are both a focus of intervention and the means through which intervention is delivered. Thus, the relationship between parent and child or caregiver and child are an important focus of intervention, while the relationship between service provider and parent or service provider and child are the *means through which change occurs*<sup>2</sup>”



# Build Organization and Practitioner Capacity

## Workforce Development Initiative

In Fiscal Year 2022-2023:

Programs to support a high quality early childhood education workforce including:

### Comprehensive approaches to raising educational standards (CARES):

Provides academic advising and support for MPC and Hartnell students pursuing ECE permits and degrees. F5MC provides specialized college counselors to support students in moving up the Permit Matrix and/or achieving an Early Childhood Education degree.

### Numbers served

### Amount expended

**604** ECE Students supported towards ECE permits and/or degrees

**\$197,580**

**24** AS/AS-T degrees awarded to ECE students (only have info from Hartnell; MPC degree data not yet available)

**4%** of all Programmatic Core Role expenditures

**223** Child Dev Permit Applications supported

**656** Formal education plan advising meetings

# Build Organization and Practitioner Capacity

## TA TO CENTERS PRINCIPLE: **SYSTEMS THINKING**

### Center/ Site

- Collaboration with and among teachers/administrators
- Support for parent engagement and communication
- Collaboration with other sites / shared visits

### Classroom

- On-Site TA
- Co-design of goals
- Reflection Meetings
- Classroom level trainings

### Agency/Administration

- Collaborative planning meetings
- Administrator Trainings and Reflective Meetings
- Teacher presentations at agency level

### Community

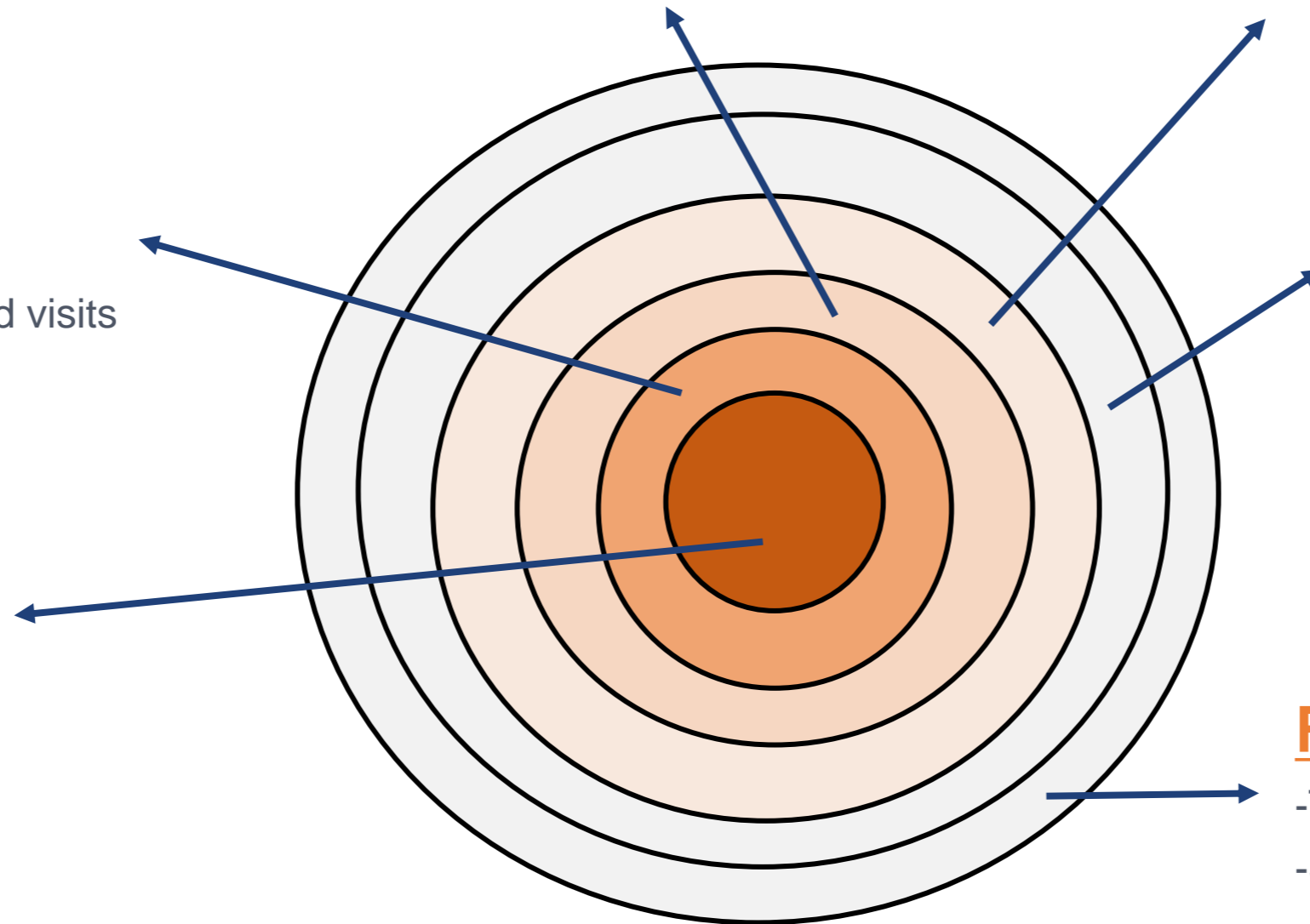
- Visibility of children and educators in community
- Resource for community visits and presentations

### County

- Monthly Cross-Site Supervisor Reflective Supervision
- TA Cross – Dialogues and Trainings
- Presentations at seminars and welcoming visitors
- Infant Family Early Childhood Mental Health Training

### Regional, State, National

- Teacher/ Provider presentations
- Sites are resources for regional and state visitors



# Build Organization and Practitioner Capacity

## Workforce Development Initiative

In Fiscal Year 2022-2023:

Programs to support a high quality early childhood education workforce including:

**Technical Assistance (TA) to Center Based Programs:** In FY 22/23, TA consultants offered regular observations to four programs to implement high-quality, Early Childhood Mental Health Consultation. The Primary Prevention approach provides both prevention and intervention support.

### Numbers served

**66** Educators supported by TA consultants across 4 ECE centers

**291** Children in centers supported by the TA to Centers program

### Amount expended

**\$118,633**

**2%** of all Programmatic Core Role expenditures



# Build Organization and Practitioner Capacity

## Workforce Development Initiative In Fiscal Year 2022-2023:

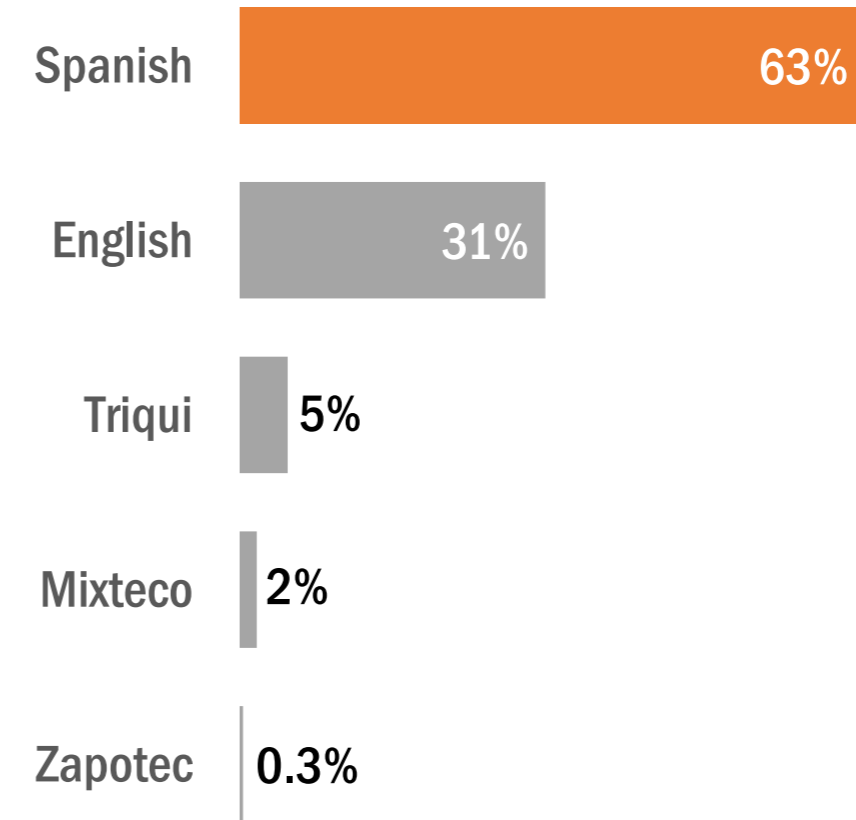
**291** Children supported by the TA program



Classrooms supported across four centers, all within F5MC's priority zip codes:

-  CAPSLO Little Angels
-  King City Migrant Child Development Center
-  Hartnell Child Development Center
-  Greenfield Unified School District Preschools

Two-thirds of the children served by the TA to Centers program speak **Spanish** as their home language





# Build Organization and Practitioner Capacity

## Workforce Development Initiative

In Fiscal Year 2022-2023:

**Reflective Practice Groups:** Reflective practice for small groups of diverse educators continued virtually to support educators in their own mental health and increase capacity to adaptively engage and be present and responsive with children and families.

**Early Childhood Seminars Series:** This 5 session seminar series with Dr. Moore connected the diverse educators who participate in the small reflective groups among each other as well as with local mental health clinicians. The educators are supported in understanding their own as well as children's behaviors including through a trauma-informed, healing centered, and culturally responsive lens.

### Numbers served

92

Educators, administrators and mental health consultants participated in small reflective groups

82

Educators participated in the socio-emotional seminar series with Dr. Martha Moore

### Amount expended

\$133,228

3% of all Programmatic Core Role expenditures

## TA PRINCIPLE: **PARALLEL PROCESS**

From center supervisors and teachers feeling more comfortable discussing feelings with each other...

“In the socioemotional series we were always talking about the neurobiology of feelings, the relational aspect of feelings and regulating feelings. [Earlier in the series] when I was facilitating different groups, I remember having conversations [with one center] where they were very adamant about ‘we don’t talk about feelings, culturally, you need to understand.’ Then, this year we got to work [at the center] in person and I heard them talk so freely about their feelings...[the teachers had become so] grounded in the emotional world.” --Dr. Martha Moore

## To supporting children in exploring their feelings as well

“One of the teachers [at the center] had taken what we had been talking about across the years—about having feelings and...integrating into how feelings inform about who we are and our identity. She...installed [a full length mirror] at the front of the classroom. She had feeling faces all around it and when there were big feelings or hard times, children could go and be in front of it and look at their faces with a teacher or with other kids...they would be with the child about what the feeling looks like, what does it feel like in your body, what does it look like on your face, who are you, what’s a different way to be with this feeling...so taking their learning in socioemotional and going way beyond. –Dr. Martha Moore



# Build Organization and Practitioner Capacity

## Cross-disciplinary training FY 22.23



The **Infant Family Early Childhood Mental Health Training Program (IFECMH)** is designed to strengthen a diverse workforce of Monterey County partners across systems serving children, prenatal through age five, and their families.

**180** Practitioners participated in the 22/23 IFECMH series

**\$316,387**

Expended /

**6%** of all

Programmatic Core Role expenditures



In its **12th year** of implementation, IFECMH 22/23 brought together participants from a range of sectors and organization types.

-  Early childhood education
-  Family support
-  Behavioral health
-  Early intervention
-  Medical / public health
-  Social services
-  Legal services



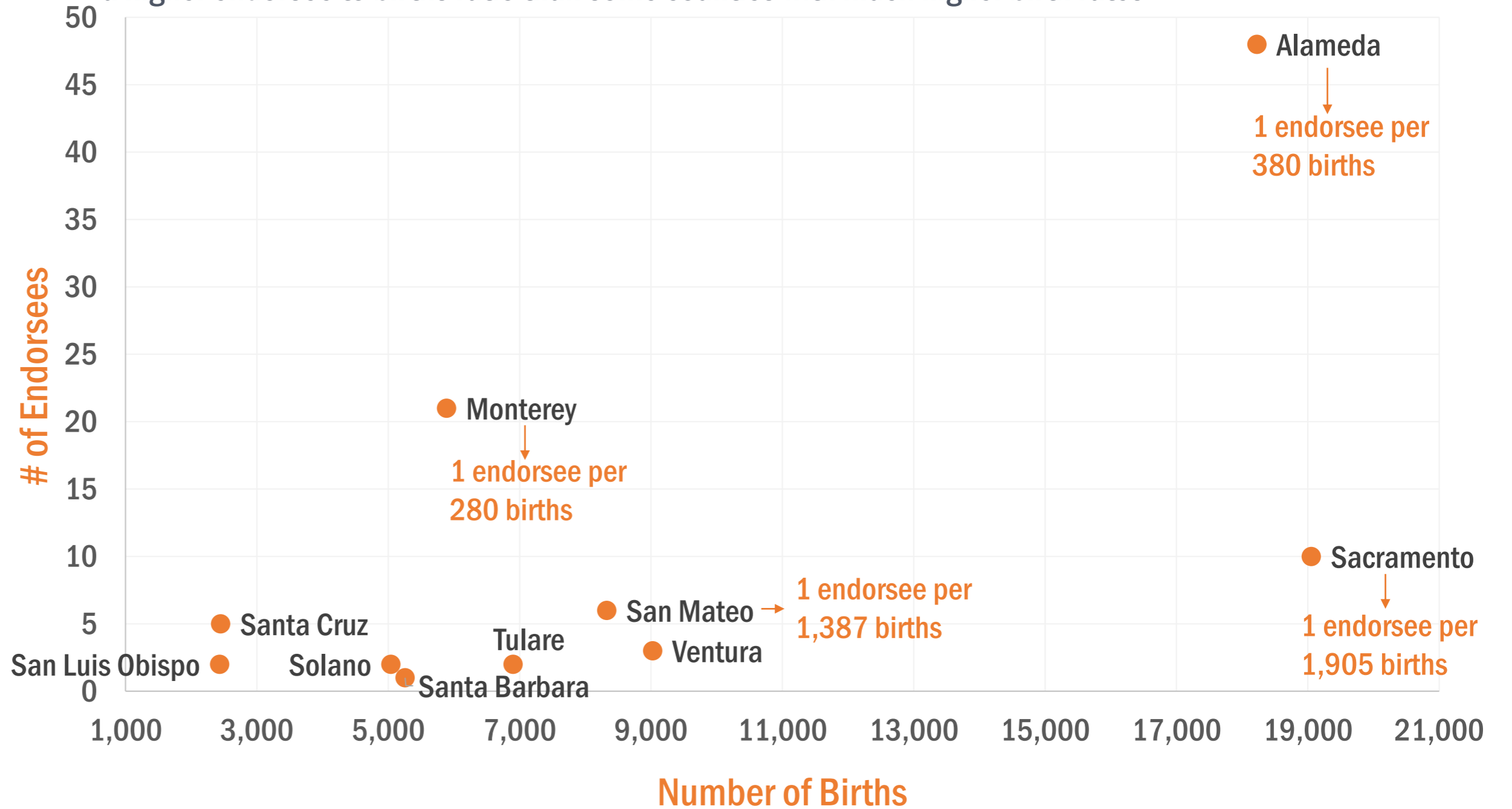
## IFECMH 22.23 included a range of diverse offerings for practitioners

Series Name	Description	Number Served
Foundational Series (four learning groups; one group facilitated in Spanish)	Focused on the development and support of the relational health of infants, young children and their families within the sociopolitical context of their environment and communities.	103
Reflective Leadership for Children's Council	Supported the introduction and use of reflective leadership processes in the monthly meetings. Led to changes in the way data/information is presented and processed at the meeting which supported closer collaboration with each other and attunement with community needs.	38
Parental Mental Health and the First Year of Life	Examined the impact of parental mental health on child development during the first year of life. Themes included how temperament can impact the-parent child relationship and how self-regulation develops within the infant parent relationship.	32
La Cultura Cura (facilitated in Spanish)	Explored the role of bilingual and bicultural providers in being a cultural bridge between the community and their professional field. Bilingual/bicultural providers reflected on their work with children and families using the lens of collective trauma and linguistic equity.	29
Understanding Social-Emotional Development of Children Prenatal to 5 to Make a Bigger Impact	Explored how IFECMH principles and practices can transform working relationships with young children and their families. Participants engaged in reflective practice and learned how it can help to create emotional safety and support difficult conversations with parents/caregivers.	27
Care Coordinator Learning Group	Supported care coordinators in reflecting on and implementing their work.	24
Capstone Learning Group	Supported providers with multiple years of IFECMH training. Providers deepened their reflective practice skills using the FAN model. They also supported others' learning by helping to facilitate small groups during the IFECMH foundational series—and strengthen their abilities to facilitate groups in their own program settings.	18
Facilitating Attuned Interactions (FAN) Learning Group (two groups: one in Spanish and one in English)	Supported providers trained in FAN in integrating and apply FAN reflective strategies in their everyday work. Together, providers helped build a community of practice for FAN providers.	9
Circle of Security Parenting (COSP) Learning Group	Supported providers trained in COSP and who were implementing parenting groups in Monterey County during FY 22.23 The learning groups supported successful implementation of the COSP parenting groups.	6

# Build Organization and Practitioner Capacity

Monterey County supports more IFECMH endorsees (21) than counties of similar birth rates—and at a higher endorsee to births ratio than some counties with much higher birth rates.

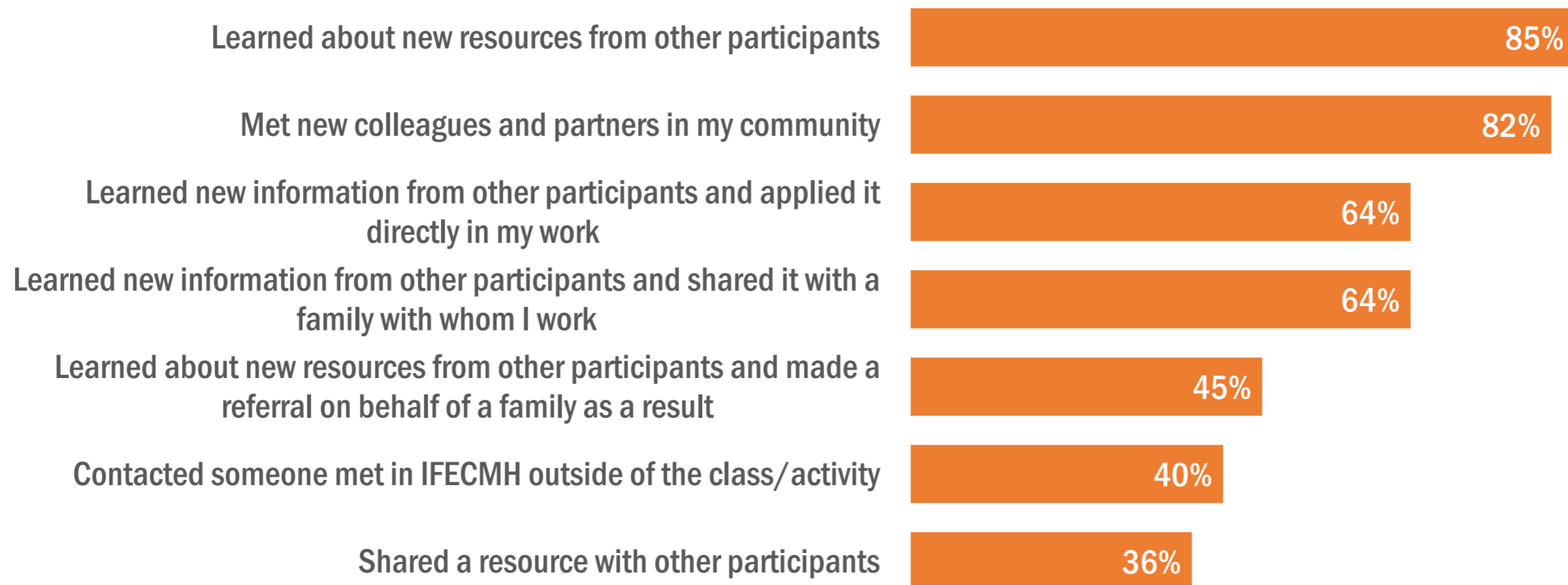
“These trainings have really built and provided a knowledgeable infant and early childhood workforce in our county”  
– FY 22.23 IFECMH Participant



# Build Organization and Practitioner Capacity

IFECMH fosters connections among practitioners across systems of care and support for young children and families. For example, in FY 22.23 most participants **learned about new resources from other participants** and **met new colleagues**. Participants also reported the ways these connections directly benefited families. For example, two-thirds **shared information learned from other participants with a family** and nearly one-half even **made a referral on behalf of a family** as a result of learning from other participants.

% of IFECMH participants who reported connecting with other participants in the following ways:



# Build Organization and Practitioner Capacity

**100%** Of IFECMH participants agreed with the statement “I have applied some of the knowledge I learned from IFECMH activities to expand the ways in which I work with children and families.”

**100%** Of IFECMH participants felt a great deal or quite a bit more compassion for others as a result of the series.

**100%** Of IFECMH participants felt a great deal or quite a bit more curious to understand more about those they work with as a result of the series.

Provide an example of a new skill you learned or how you applied what you learned to your work.

“I try to remove myself or my perspective and really hone in to listen and understand the parent and how/what they are experiencing a situation. I refrain from giving advice and instead ask questions like ‘what seems to work for you?’ or ‘what do you notice happened before the behavior starts’ or ‘how did that make you feel?’”

“Practicing Reflective Supervision helped me feel heard and validated, and I applied that compassion to my work with the families I served.”

“Slowing down, holding others and information, forming an understanding what slowing down and holding others really means and how healthy it is to just listen rather than running to fix”

“Being mindful of ‘being with’ families. This is something that I had begun doing but was not aware was a practice and learning about it is helping me learn to be better at it. Additionally, making connections with other service providers has given me the opportunity to refer families and give them more options.”

# Build Organization and Practitioner Capacity

## Playgroup Capacity Building

Programs to support quality early childhood services:

**Playgroup Learning Group:** Provides the opportunity for parent-child and FFN playgroup leaders to check-in about their progress, discuss successes and challenges, and support each other with navigating their roles as playgroup leaders. The learning group **also includes non-F5MC funded partners** who offer playgroups and serves as a way to **convene and support playgroup leaders across the county.**

**Playgroup Technical Assistance:** Consultants visit playgroups and provide technical assistance to ensure support to deliver high-quality playgroup services.

**Reflective Supervision:** Consultants provide monthly reflective supervision opportunities for playgroup leaders and Collaborative managers responsible for overseeing playgroup services.

In Fiscal Year 2022-2023:

**31** Providers supported

### Agencies Served:

#### F5MC Funded Partners

AUSD

Door to Hope

Go Kids/Salinas Public Library

PVPSA

NMUSD

#### Non-F5MC Funded Partners

Monterey County Health Department: Behavioral

Health, Early Childhood Services

CAPSLO

**\$18,221** expended

**0.4%** of all Programmatic Core Role expenditures



# Build Organization and Practitioner Capacity

## Other Capacity Building and Support

Programs to support quality early childhood services:

In Fiscal Year 2022-2023:

**\$17,535** expended  
**0.3%** of all Programmatic Core  
Role expenditures

**Collaborative Learning Group:** An opportunity for partners across the Collaboratives to connect and discuss topics important for serving families.

**38** Providers participated in the Collaborative Learning Group

**Abriendo Puertas Parent Education Facilitator Training:** Training for facilitators to implement the Abriendo curriculum. Abriendo Puertas is an evidence-based training program developed by and for Latinx parents with children ages 0-5.

**20** Providers participated in the Abriendo Puertas facilitator training

# SECTION IV



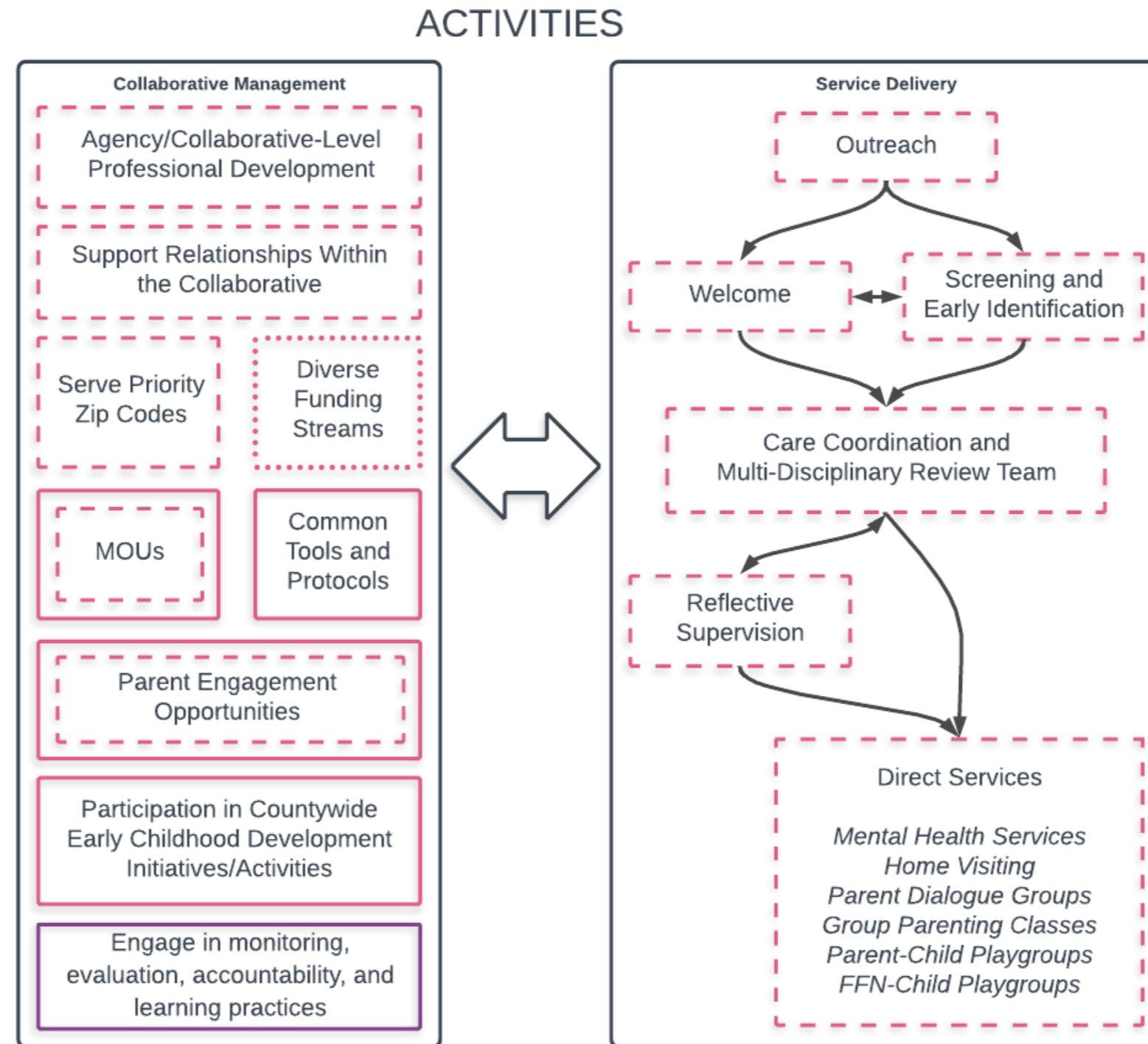
## Fund the Work

**STRATEGY: Fund the Integrated Service Collaboratives**

# Fund the Integrated Service Collaboratives

Lead Agency: Integrated Service Collaborative	Area served	Child Developmental Screening	Parent-Child Playgroups	Parenting Classes	Home Visiting	Counseling	Parent Dialogue Groups	FFN Provider-Child Playgroups
GoKids, Inc.: Nuevas Posibilidades/ New Possibilities	Salinas	✓	✓	✓	✓	✓	✓	✓
Door to Hope: MCSTART (includes Centro and Probation)	Countywide, with focus in S. County	✓	✓	✓	✓	✓		
North Monterey County USD: Castro Plaza Family Resource Center (FRC)	Castroville area	✓	✓	✓	✓			
Alisal USD District: Alisal Healthy Start FRC	Alisal USD area	✓	✓	✓				
Pajaro Valley Prevention & Student Assistance: Pajaro Saludable Collaborative	Pajaro area	✓	✓	✓		✓		

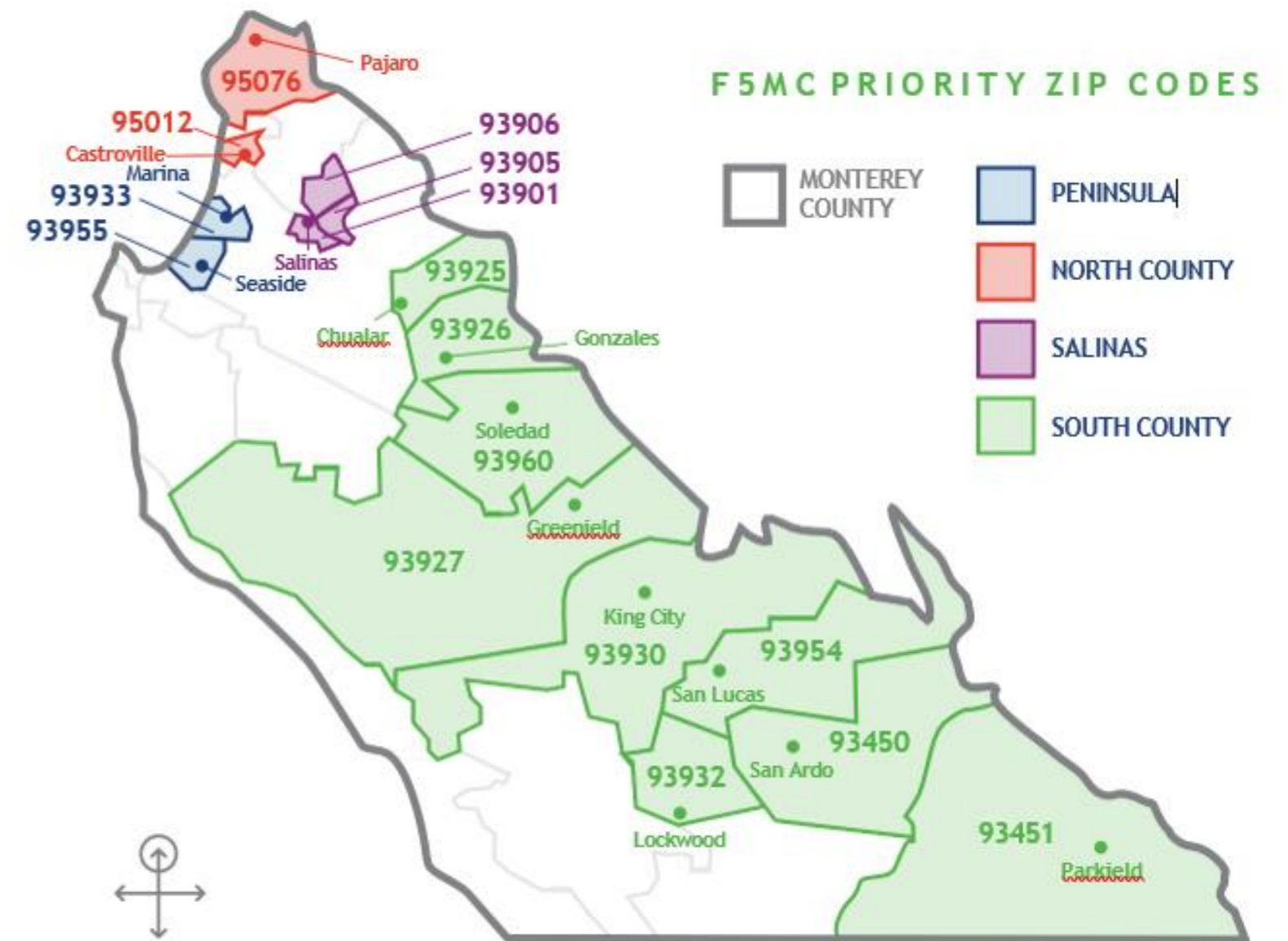
## The Collaborative Model of Integrated Services:



## F5MC Priority Zip Codes

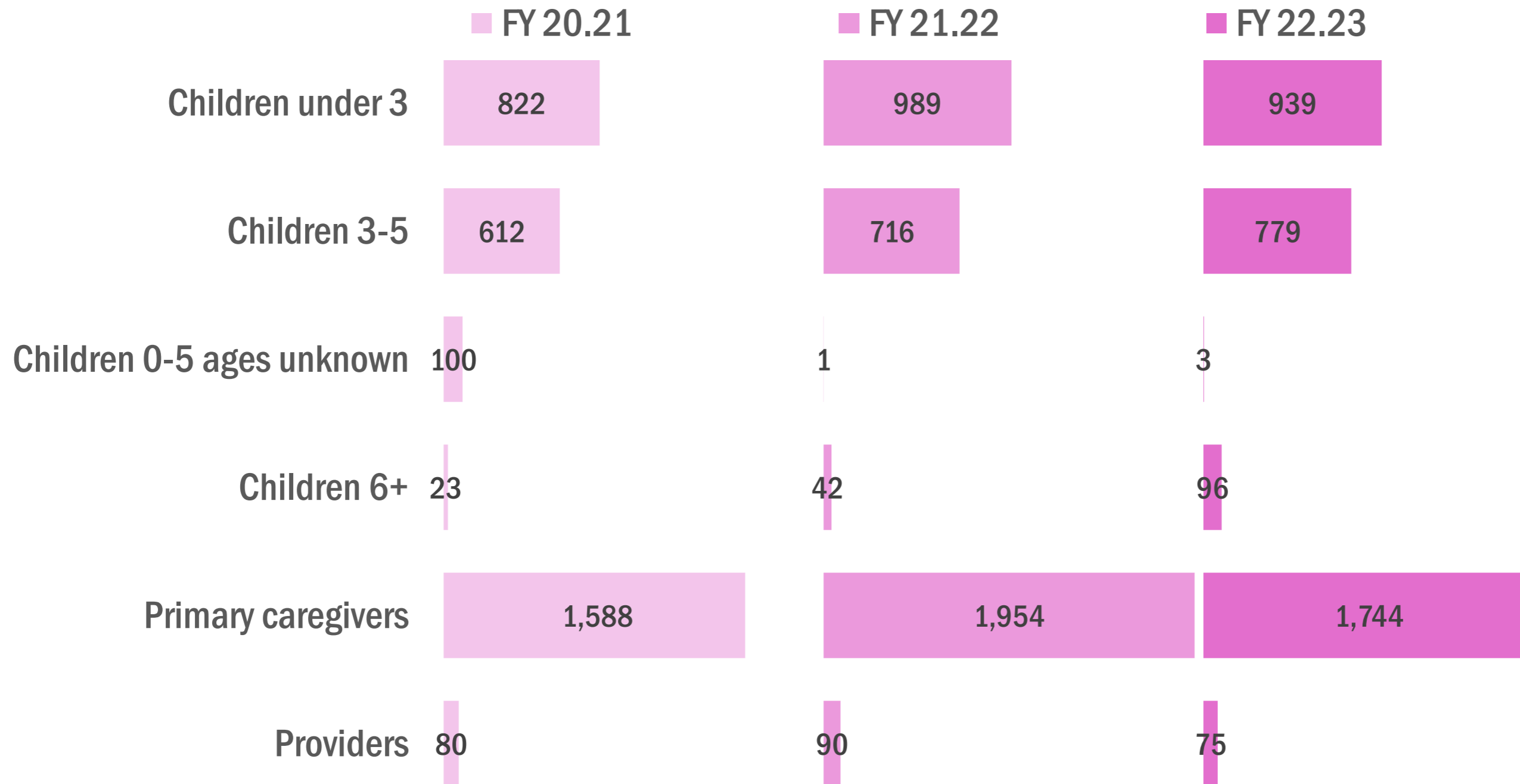
F5MC prioritizes serving children and families with the greatest need and furthest from opportunity. As a proxy, to reach those families, F5MC analyzed several socio-economic indicators to determine geographic areas as “high priority” based on their rank. As part of the F5MC 2017-2023 Strategic Plan Framework, the following indicators were used to determine priority zip codes:

- Number of children 0-5
- Percent of third graders below 3<sup>rd</sup> grade reading level
- Percent of center-based slots per number of children 5 and under
- Percent of family child care home slots per number of children 5 and under
- Percent of mothers without prenatal care in their first trimester of pregnancy
- Rate of child maltreatment allegations
- Rate of juvenile probation
- Percent of children in poverty, per federal poverty levels
- Percent of households with more than 1 occupant per 2 rooms
- Percent of medically underserved census tracts



# Fund the Integrated Service Collaboratives

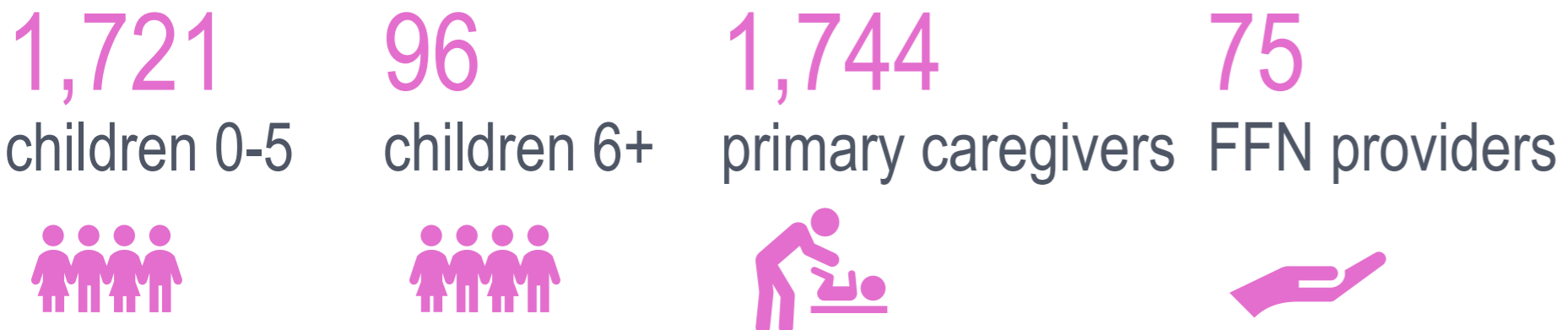
Collaborative partners served similar numbers of children, caregivers and providers across the past three fiscal years.



# Fund the Integrated Service Collaboratives

In FY 22/23:

## Clients Served by the Collaboratives



## Amount Expended

\$2,980,733 expended on Fund the Collaboratives

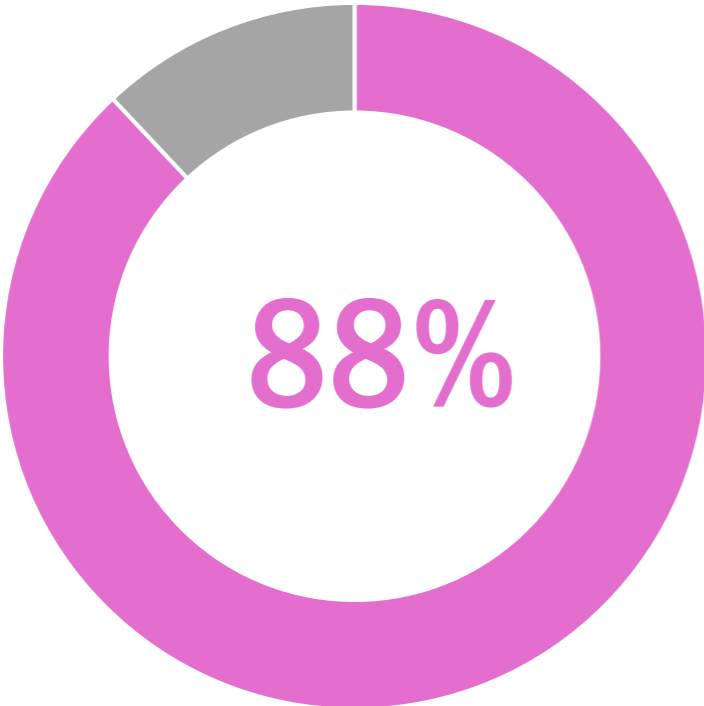
58% of all programmatic core role expenditures



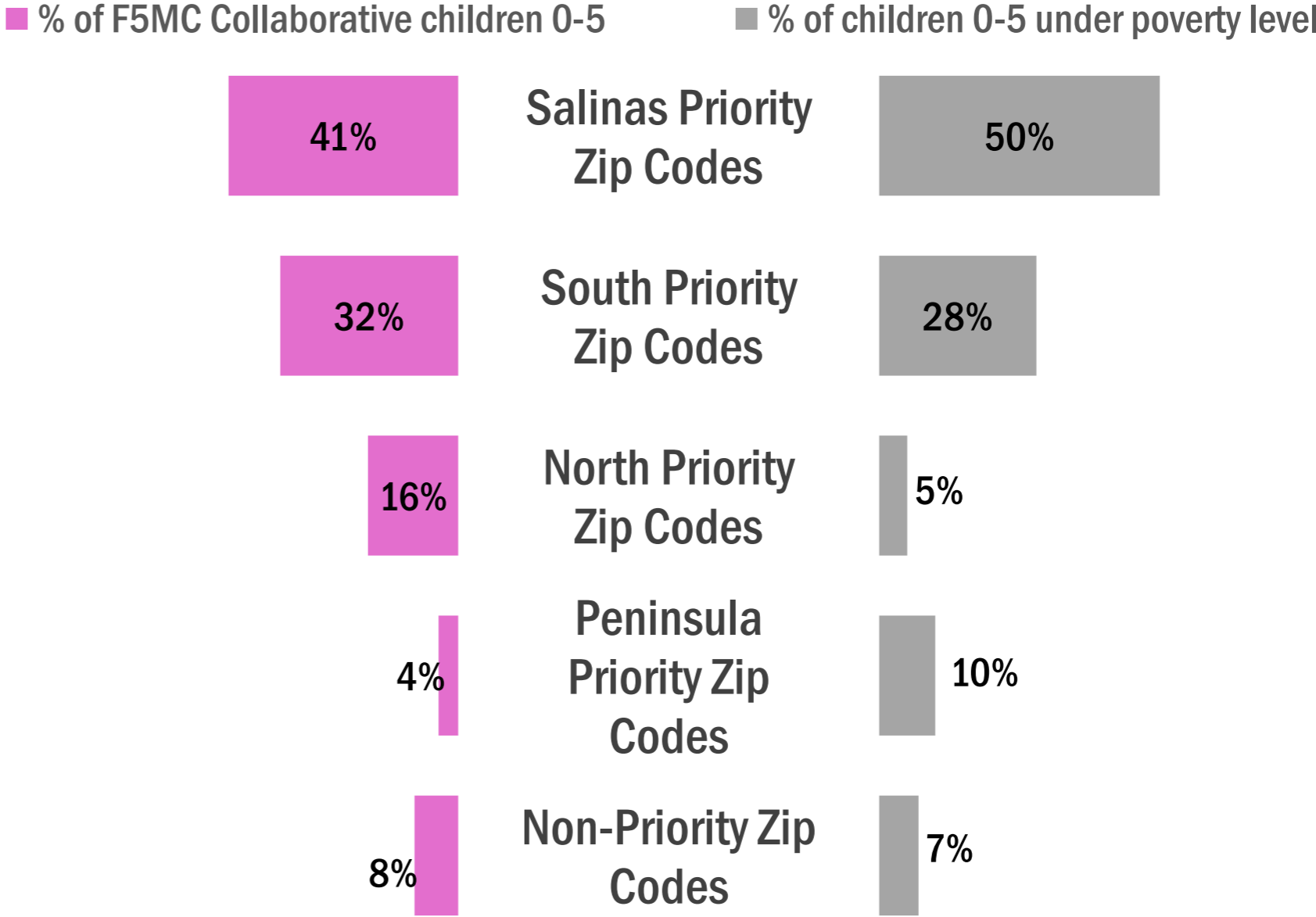
# Fund the Integrated Service Collaboratives

1,721 children 0-5 received services

Nearly all children 0-5 served by the Collaboratives are served by **Medi-Cal**



92% of children served by the Collaboratives reside in F5MC's priority Zip codes

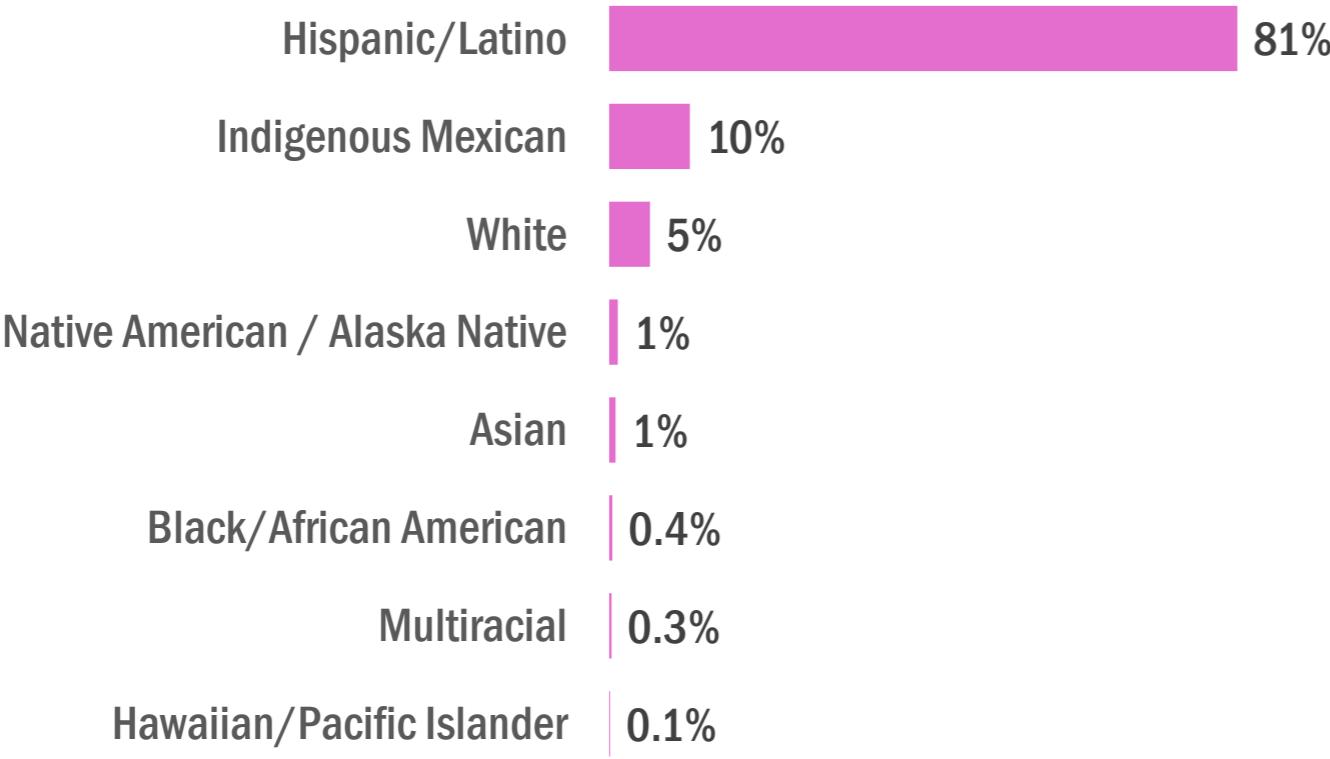




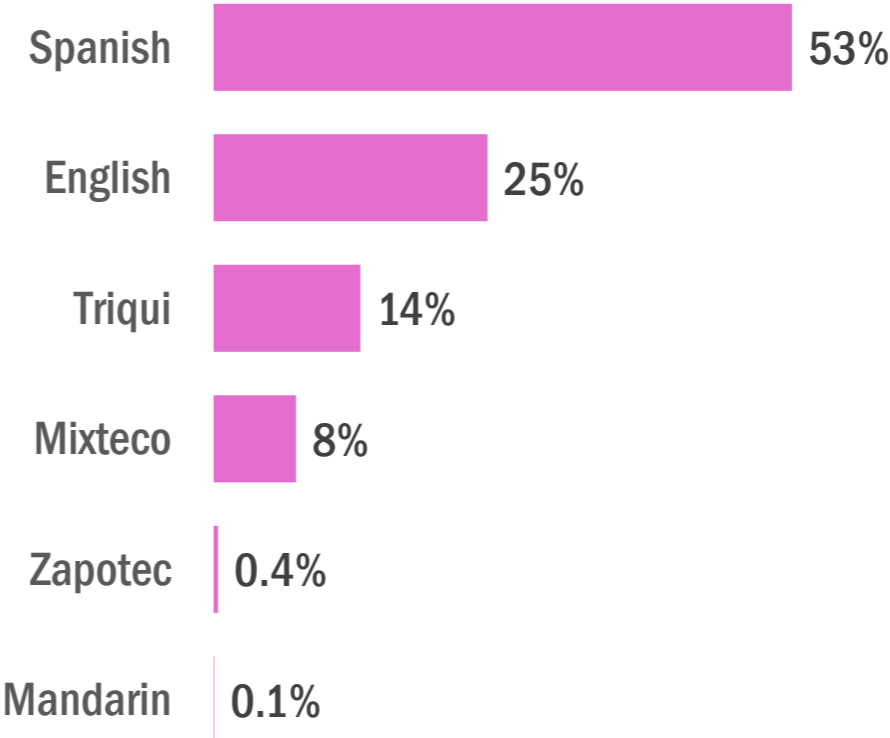
1,721 children 0-5 received services

Similar to children overall in Monterey County, the majority of children served by the Collaboratives were identified by their caregivers as Hispanic or Latinx. The majority of children are on their way to being bilingual by speaking Spanish. Many children are also on their way to being bilingual by speaking Triqui, Mixteco and Zapotec.

Ethnicity of children 0-5 served by the Collaboratives



Primary language spoken at home of children 0-5 served by the Collaboratives

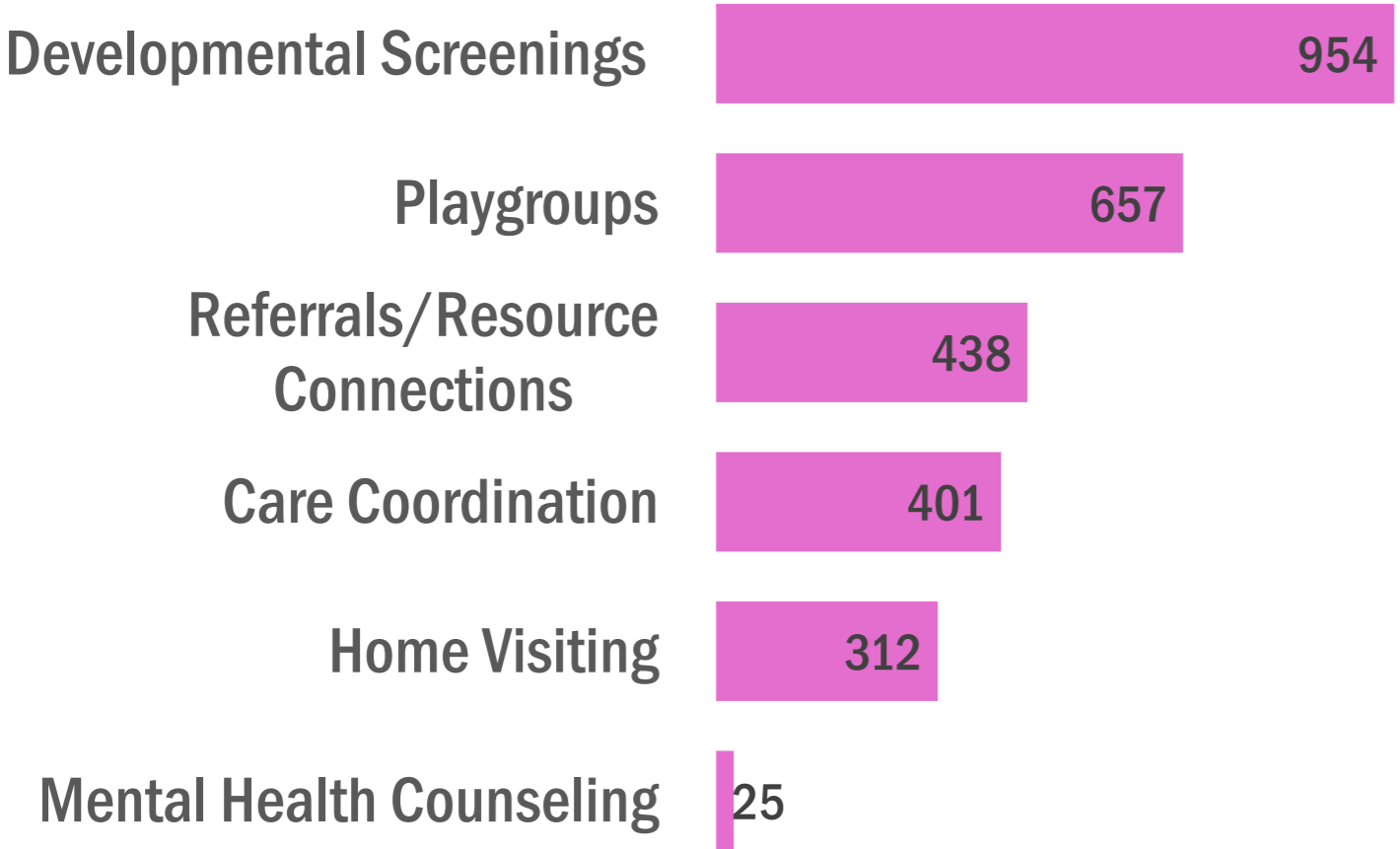


# Fund the Integrated Service Collaboratives

1,721 children 0-5 received services

### Children Served by Collaborative Services

Collaboratives provide a range of services to children. In **FY 22/23**, half of children served received at least one **developmental screening**; more than one-third participated in **playgroups** and one-quarter were intensively served by **care coordination** and support with **referrals**. Nearly one-fifth of children were intensively served by **home visiting**.



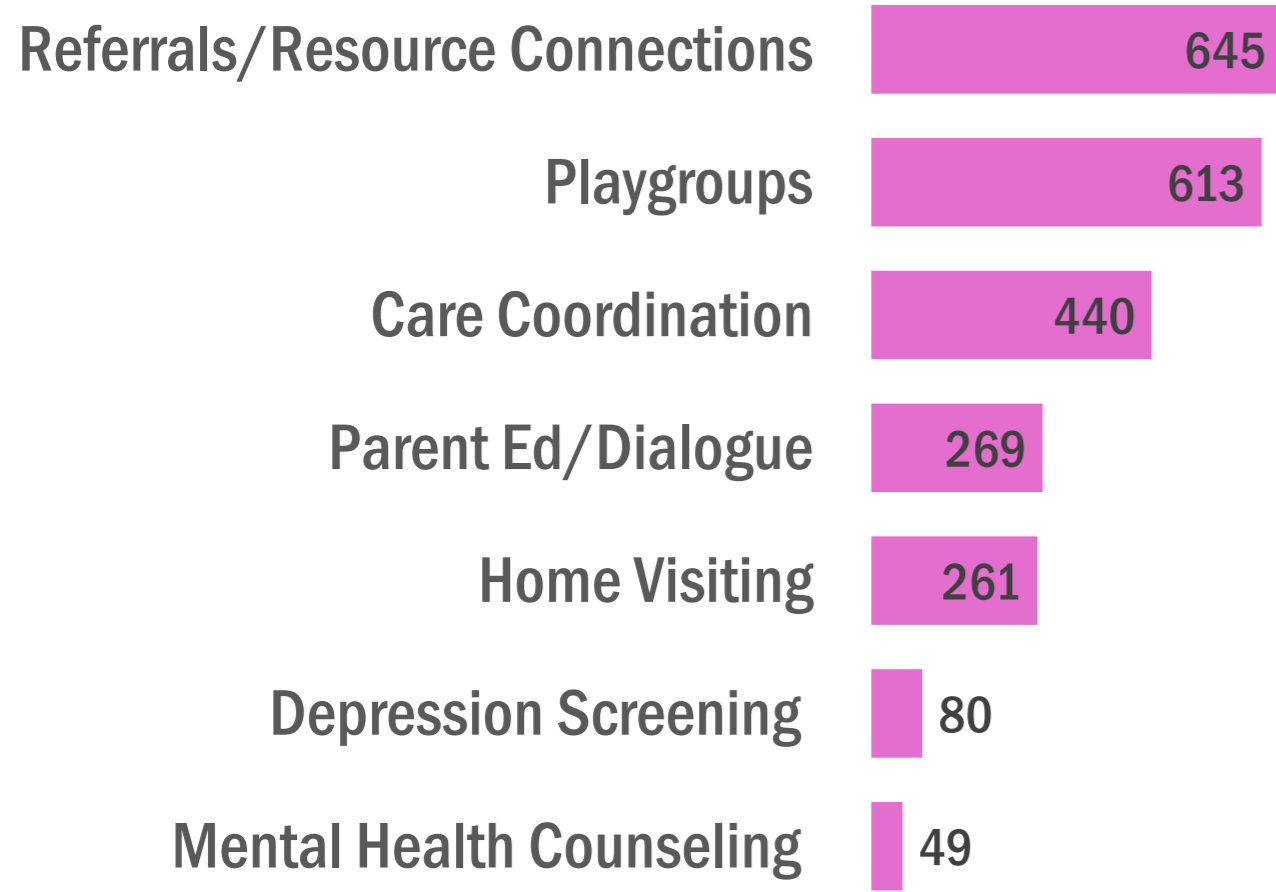
Totals add to more than 1,721 (total number of children served in FY 22/23) because children can participate in more than one service.



**1,744** primary caregivers received Collaborative services

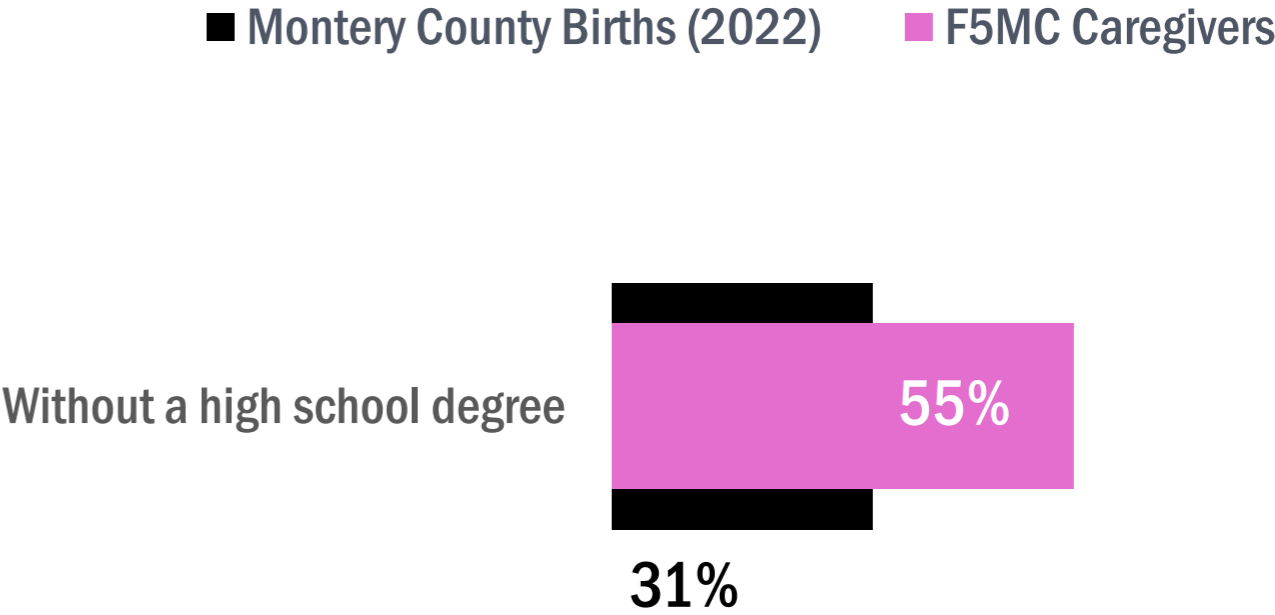
### Primary Caregivers Served by Collaborative Services

Collaboratives provide a range of services to primary caregivers. In **FY 22/23**, the largest proportion of primary caregivers were served by support with **referrals** followed by **playgroups** and **care coordination**.



*Totals add to more than 1,744 (total number of primary caregivers served in FY 22/23) because children can participate in more than one service.*

F5MC serves a **larger proportion of caregivers/parents (55%)** who haven't had the opportunity to finish their high school degree than in Monterey County at large—in 2022, **31% of births** in Monterey County were to mothers without the opportunity to complete their high school degree.



## Theory of Change:

Funded partners engage in more frequent, structured and effective communication

Services for families with young children demonstrate higher levels of quality / coordination



Families are able to navigate services more effectively

Families receive more cohesive services for their needs

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## Collaborative partners were asked “what were your greatest successes over the last six years”

### Successes with the Collaborative Model

- Staff across the Collaboratives worked together to better support families and held shared values in how to support families. Families needing additional services within the Collaborative were referred with warm hand-offs, helping to maintain families’ trust.

“This family had a child under 1 and was able to participate in home visits. Through relationships, mom started sharing about her trauma and her financial stressors and worries about her children; we then brought [the family’s] case to MDRT to think about next steps for family.”

- Collaboratives were supported in making connections to other agencies, beyond the Collaboratives to build a system of support for families

“The Collaboratives have allowed us to learn about many other agencies and their services and how we can work together to support a family.”



## What have been your greatest successes over the past six years?

“Our most notable success has been having the opportunity to practice what we preach. Most systems and agencies understand and believe in the benefits of family-centered, cohesive, holistic and collaborative services. However, very few have the capacity and flexibility to offer these type of services. **Over the last six years we created a collaborative of agencies that built strong connections with each other and supported each other in our work.** We came together to learn about the children and families in our county and **we took the time needed to slow down and reflect on the most challenging aspects of our roles.** F5 Collaboratives embedded staff development and support into its structure **to assure staff felt valued, prepared, and motivated to provide the essential services our families needed.** We had the spaces to reflect on what worked and what needed to improve to enhance the quality of our work. We co-created systems that included everyone's voices. **We heard first hand from our families that they felt seen, respected and supported in reaching their goals.** We were able to take our experiences in collaborating with our F5 partners **and applied the same principles to our collaborations with outside agencies.** It was this that has made a world of difference for our families. Our strong connections with community agencies has facilitated our ability to assure families successfully connect to the services they need. Though our Collaborative services might be decreasing, the spirit of collaboration will continue to be infused into all aspects of our Door to Hope work.”

## Success with the FFN Provider-Child Playgroups

**Within the Collaborative model, Go Kids FFN Playgroup Facilitators discussed the following successes:**

- FFN providers feel that their work is valued
- Providers feeling seen, recognized and valued and supporting children in feeling seen, recognized and valued
- Providers changing their perspective and practice
- Providers learned together and learned from each other
- Providers developed a community together and formed long lasting relationships

“Providers feel seen, accepted, recognized and valued; this provides a great benefit to the child because the child may also feel the same way--they will feel as if they are in a safe environment; we see this when our providers don’t feel isolated and they feel connected....we noticed these outcomes during dialogue and reflection groups: notice their vocabulary changing and their patience changing...more conscious providers, using the group as a way to learn from one-another. How to have a healthy child case load, how they are better able to understand child behaviors and be curious as to why that is.”

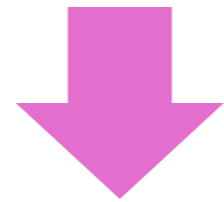
“Many people didn't even know one another 10 years ago when we started and now we are a family that was formed through trust building among us. I am especially proud of working with immigrants like me, where we came to this country, sometimes without friends or family but the women in our groups have expressed that this has been a great experience for them. I think the thing that made a difference was that this was an accepting group where they felt that they belonged there, were accepted, and had confidence. Due to the years of relationship building in the groups they had the confidence to speak about things that they wouldn't talk with others about. Also how they built a community where they learned from each other and shared their experiences working with children, parents, and their struggles.”



## Theory of Change:

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Families are able to navigate services more effectively

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## What have been the greatest success with Care Coordination?

Within the Collaborative model, partners discussed the following successes over the past six years with care coordination:

- Care coordination is guided by the parent and their specific strengths and challenges. This allowed for meeting families where they are and having the flexibility to serve families in more than one capacity.
- Care coordinators provided a safe space for families to share stories about their struggles and worries about their children—often care coordinators were the first person families trusted enough to open up to.
- Families were connected to resources that they would not have been connected to otherwise. Partners also emphasized connecting families to early intervention services and the positive and long term outcomes for families.
- Parents increased protective factors and decrease stressors
- Parents felt valued, heard and empowered, allowing them to validate their children’s feelings and be more present with their children



“When we see parents are stabilized, empowered and they can advocate for themselves at clinics and IEPs and able to see families validate their children’s feelings and slow down to their needs--we are able to see parents really engage and be present with their kids, following their leads. When parents are able to self-regulate, they are able to co-regulate with their children.”

## What have been the greatest successes with Parents as Teachers Home Visiting?

Within the Collaborative model, partners discussed the following successes over the past six years with Parents as Teachers (PAT) home visiting:

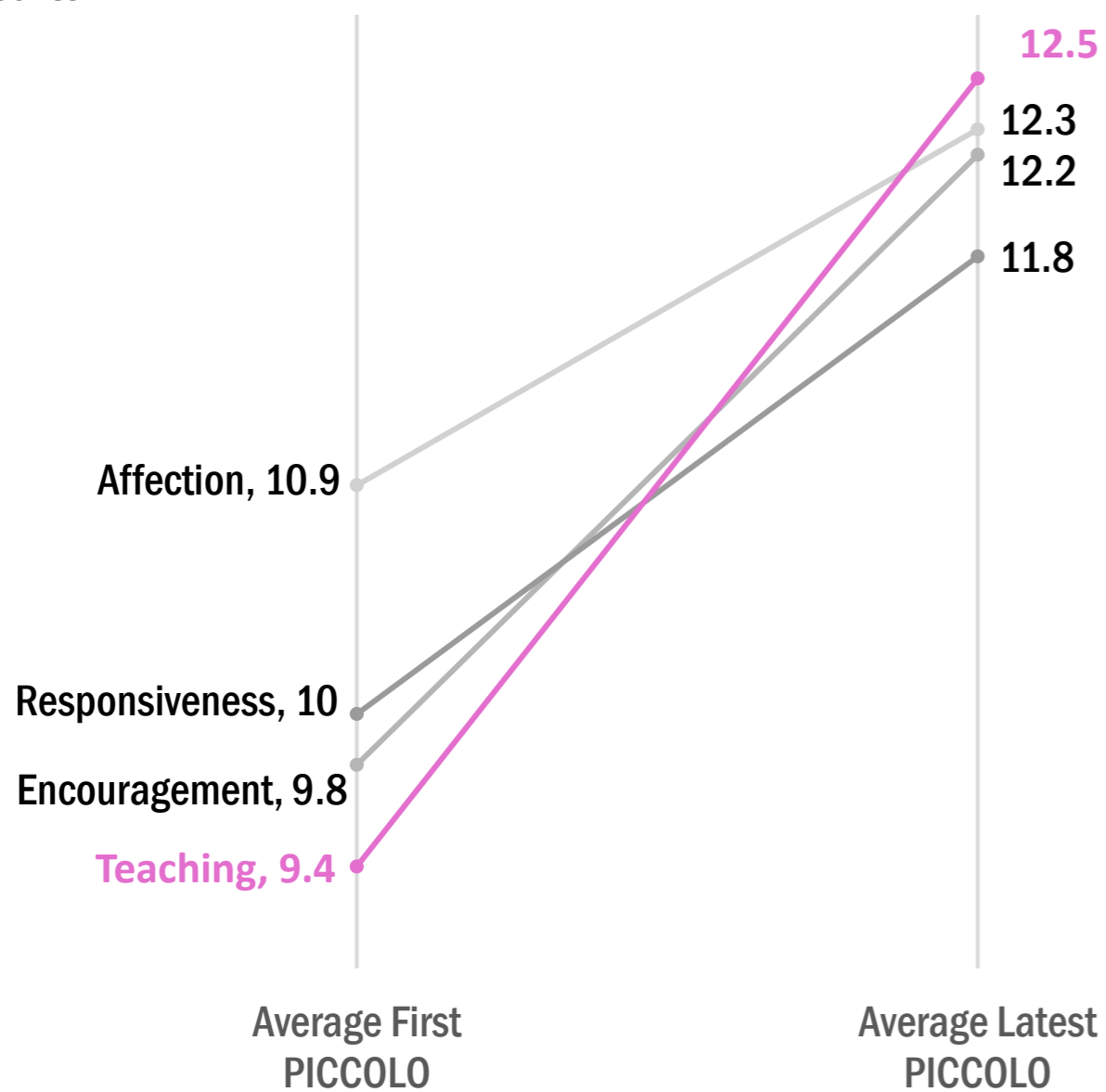
- F5MC offered flexibility to serve families as long as they needed the support—allowing families to build strong connections with their home visitor and allowing the home visitor the time needed to truly support the family with protective factors.
- Through the Collaborative model, screeners/care coordinators were able to do warm hand offs to home visitors, and families feel there is trust and a village behind them. Home visitors were able to think with other staff during triages and MDRTs about next steps for the family.
- The PAT model addressed the needs of all family members and focused on the different stressors that impacted parents' ability to focus on the developmental and behavioral needs of their children.
- PAT intake and screening tools/processes have led to great successes with early intervention.
- Parents shared that prior to home visiting, they were feeling isolated and didn't know what other community resources were available.



“Because the PAT program can be tailored to fit the needs of any family, many families learn and grow with their educator for longer than others. It was great to have the time and flexibility to really address those protective factors, such as housing, child care and mental health, that can be long-lasting challenges for our families but that when mindfully addressed, can make a world of difference to the entire family ecosystem.”

## PAT Home Visiting Parenting Outcomes

Scores on the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO) Tool. Home Visitors observe parent-child interactions using the PICCOLO at the start of the program and then yearly thereafter.



PICCOLO observations showed an overall increase in positive parenting behaviors across all four domains. In particular, PAT families demonstrated the largest increase in positive **Teaching** behaviors.

“[A PAT] mom said she has learned the power of having a conversation with her daughter and how it teaches her receptive communication and [her daughter] has increased her vocabulary.” –PAT coordinator

“Families are really slowing down and thinking about the meaning behind [their child’s] behavior. They are really reflecting on what’s happening for kiddos and themselves.” –PAT coordinator

## What have been the greatest successes with Playgroups?

Collaborative partners discussed the following successes from the past six years of offering playgroups, within the Collaborative model:

- Developed trust with families, particularly with Indigenous communities.
- Parents felt safe to express themselves and explore their parenting journeys.
- Parents formed relationships and created community with each other.
- Parents were better able to recognize signs of growth in their child.
- Parents changed their perception about how valuable play is for development.
- Parents deepened the value they placed on reading with their children; parents who weren't able to read saw the value of reading picture books with their children.
- Children built their language, social and fine motor skills.



“Our biggest success has been establishing the trust needed to reach the Triqui community of Greenfield. This experience has taught us that we need to take the time to make the effort to humbly learn about the needs of our diverse communities... We also understood that [parents] wanted spaces specifically for them where they felt safe to express themselves and their parenting practices... Having these spaces gave them the freedom and confidence to begin exploring their parenting journeys and began taking in the information we have to share. They now share how playgroups have become a place where they feel safe to be themselves and to learn how to better support their children.”

## What have been the greatest success with Parent Education series?

Within the Collaborative model, parents who participated in Parent Education offerings...

- felt the classes were safe spaces to share their experiences without judgment and learn from each other
- felt supported to maintain their calm and in being an effective leader and holding boundaries
- reported huge changes in their relationships with family and others around them
- deepened their understanding of the value of play and playing with their child
- learned about being their child's first teacher and how to resolve different challenges with their child
- learned how to advocate for their child
- changed their perspectives on how to take care and connect more with their child when they are little
- benefitted from the healing and mental health support that happens in community



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3. Berlin, L.J., O'Neal, C.R., & Brooks-Gunn, J. (1998). What makes early intervention programs work? The program, it's participants, and their interaction. *Zero to Three, 18*, 4-15.