First Five Yuba Evaluation Findings
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“We are so happy that you provide feedback to us. First Five Yuba is the only grantor that we have who has taken the time to help us reflect on our goals and outcomes, and help us make our program better. So, thank you for that!”

Mrs. Chaya Galicia
The Salvation Army
Yuba Sutter Corps

The First Five Yuba Commission (FFY) contracted with the Davis Consultant Network (DCN) to develop evaluation plans for its grantees and work with FFY staff to monitor implementation of programs. This is the summary report of evaluation findings for program activities for the July 2010-June 2011 fiscal year (FY 10-11). It provides both highlights on how FFY investments have impacted the outcome areas in the First Five Yuba Commission 2009-2011 Strategic Plan and substantiates these findings with data collected by each program.

DCN met with FFY staff and representatives from all agencies receiving a major grant. Together they discussed the program’s goals and objectives and reviewed available program performance data. A logic model and an evaluation plan were developed. Efforts were made to collect measures that both reflect the program process (what activities were done) and its outcomes (what is different in lives of children and families.) In many cases, tools were developed to ensure both types of information were gathered.

As a part of the FFY contract monitoring, all grantees are required to submit quarterly Milestones. DCN and FFY staff developed individualized quarterly Milestones for all programs where measures of their contracted activities would be reported. After receiving these quarterly reports, they were reviewed by DCN and FFY staff. Where there were questions, grantees were contacted and either asked to provide supplemental information or the evaluator worked with the program to explore answers. The service providers have been responsive to clarifications and should be commended for the great care and effort they have demonstrated in documenting their program activities and impacts.
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First Five Yuba Commission
Evaluation Findings
Fiscal Year 2010-11

Executive Summary

The First Five Yuba Commission (FFY) contracted with the Davis Consultant Network to evaluate its programs and progress on its 2009-2011 strategic plan. FFY investments have led to the many accomplishments listed below.

Family Functioning Findings

- The AmeriCorps program has utilized volunteers to bring an array of activities to Yuba Families. They creatively expanded service locations by offering programs to foster/kinship families and Mary Mead residents. Two of the home visitors demonstrated ability to establish trusting relationships and encourage families to more actively engage with their children.
- The Baby Steps program successfully trained community leaders who have begun training families in the use of the 40 Developmental Assets identified by the Search Institute.
- The Salvation Army Linked program is working with families facing multiple challenges. They continue to work toward upgrading the child care environment, and providing mental health screening for young children. Their families are accessing medical and dental services.

Child Development Findings

- The CDBS program has been effective identifying and serving families whose children demonstrate at-risk or atypical behaviors. Additionally, it builds families’ and early education providers’ capacity to support healthy child development. The program is well integrated into the community, receiving referrals from over 40 agencies.
- With FFY assistance, the First Steps Perinatal Day Treatment Program childcare program has expanded its hours, staffing and the quality of its program.
- FFY and Marysville Joint Unified School district continued to offer a school readiness program at three high-poverty elementary schools: Cedar Lane, Ella and Linda. The program has become a resource for families with young children in the target schools. Families enjoy and participate in workshops. Parents learn and improve their eating and exercise habits. Children receive health screens and their families are assisted in accessing community resources, most notably the Dental Van. Fifty-two children had their first preschool experience through the high quality summer KinderCamp.
Child Health Findings

- The Baby Buddies program has leveraged the Harmony Health Clinic's medical relationships with vulnerable families. It has provided individualized holistic support for 98 pregnant mothers and families with a total of 103 young children to make progress on an array of personal goals. The program family advocates received highly qualified support and bring a variety of personal competencies to match with varied family needs. The families in the program achieved extraordinary health milestones in pre- and post-natal care, healthy births, oral health knowledge, immunization rates and initiating breastfeeding. They reported high satisfaction and many have made significant progress on their personal goals.
- Yuba County Public Works has designed and constructed a public playground for young children at the POW/MIA Park in Linda.
- Camptonville Community Partnership (CCP) has provided training, coaching, and follow-up to 20 area service providers on how to do dental screening for young children and how to provide fluoride varnish. In the process of program implementation, CCP has discovered populations with a low rates of insurance coverage (79.5%) and low rates of successful application assistance (32%) which suggest another community need.
- The Yuba County Office of Education Gas Card Program has played an important role in assisting 60 Yuba families to access specialty medical care not locally available for their child.
- The Healthy Babies Healthy Parents provided small group education to 148 parents on how to promote healthy eating, activity and dental care. Participants report high satisfaction and intent to improve nutrition and physical activity.
- The NAP SACC helped 9 child care providers focus on very specific ways to promote good nutrition and physical activity. Participating providers significantly improved their nutrition and physical activity environments, most notably in the adoption of physical activity policies, providing nutrition education in the classroom, and providing physical activity education. Their four community workshops were well received, with appreciation for their participatory style and the resources and activities that providers could use at their sites and with their families.
- Yuba County Office of Education and the Plumas Lake Child Development Center (PL-CDC) to construct a shaded outdoor playground used by young children. PL-CDC program staff have developed and implemented classroom activities that promote physical activity.
- Yuba County Public works now offers a core of public recreational programs for all ages. Last year the program served 82 infants and toddlers and 278 preschool aged children.
- Olivehurst Public Utilities provided fluoridated water to 5670 households.
- FFY invested $27,540 in Healthy Kids insurance premiums for 23 children.
- The “Happy Tooth Mobile” dental van which was purchased by FFY for Marysville Joint Unified School District in FY 07-08, program provided 1072 appointments for 385 children 0-5.
Systems of Care Findings

- Grantees provided a 50% match to the commissions investments through supplemental fundraising, volunteer recruitment and supervision, professional services provided by private or public agencies, donated materials, use of facilities, donated program materials, collection of donated resources for families and translation services.
- Grantees named 140 collaborating agencies, including county and non-profit agencies, private businesses, the media, educational and training institutions, partners from adjacent counties, and Beale Air Force Base.
Program Findings
AmeriCorps

Program Description

GraceSource (GS) is contracted to train and supervise 4 AmeriCorps members as a part of the Prevent Child Abuse California Initiative. The AmeriCorps provide five core services ranging from universal outreach through intensive case-managed home visiting:

1. **Outreach, information** and recruitment of families for First Five Yuba (FFY) programs (county-wide);
2. **Center-based drop-in family support** information, referral, health insurance application assistance and basic needs (food, diapers, clothing, housing assistance);
3. **Community events** for families that combine fun and education;
4. **Parent education programs**;
5. **Case management and home visiting** to support family-identified goals (family functioning, parenting and child development.) Duration varies based on family’s choice. Visitors do initial screening to discover participant objectives. They also bring resources and information to families in their homes drawing from *Healthy Families America*.

In FY 10-11, FFY invested $62,214 in this program.

AmeriCorps reported support for 45 community events including craft workshops, movie nights, family reading nights, preschool reading at the library and preschools, a book drive, staffing the farmers market play area with nutrition and physical activities, family fun and community clean-up days. While unduplicated counts of families served is not possible, they report 759 “units of participants”, averaging 17 families participating per event.

AmeriCorps reported that 97.6% of the 168 families with children 0-5 that dropped into the Family Resource Center (FRC) had health insurance. Families received First Five Welcome Baby kits, diapers, emergency food and clothing assistance. They also assisted families with paperwork, faxes and translation.

AmeriCorps offered Nurtured Heart Workshops throughout the year, and computer literacy in the first and fourth quarters. The Nurtured Heart workshops curriculum is derived from the work developed to help adults work with children with challenging behaviors. AmeriCorps offered 24 Nurtured Heart classes with average attendance of one provider and four families per class. They offered these at the GraceSource FRC, through the Yuba College Kinship/Foster Care program, and at Mary Mead Housing. Like all FFY funded workshop series, GraceSource was asked to collect feedback forms at the final class of the series. Twelve forms were returned. Overall, 100% would recommend the series to others, found the handouts helpful, and the time that workshops were offered to be a convenient. Parents commented that the workshops helped them set limits, use time-outs and develop credit systems for following rules.
Additionally, a 4-week computer literacy class was offered in the fall at GraceSource FRC and a 10-week series in the spring at Mary Mead Housing with average attendance of 1 provider and 3-4 families. No feedback forms were submitted. Four life skills classes were offered in summer quarter, attended by an average of 1 provider and 2-3 families.

**Home Visitation**
Twenty-five families participated in the Home Visitation/Case Management program with a total of 51 children ages 0-5. They received a total of 190 visits. Twelve families who initiated home visitation were terminated when staff was unable to sustain contact with the family. One family moved into the Head Start home visitation program.

AmeriCorps submitted 9 family satisfaction surveys, all from families seeing two of the four home visitors. Four families had all seen their home visitor 11-20 times and the other five reported seeing their home visitor more than 20 times. Families reported that they were participating in the program to make progress on the following goals: to do activities with their children; to get resource information; to toilet train their child; to prepare for applying for citizenship; to learn to work with their child. All families reported progress on their goals with 67% “very much so”; 11% “mostly achieved”; and 22% “somewhat achieved”.

Increasing reading frequency was one goal of the program. Four parents reported reading daily to their child, 3 reported reading 3-5 times per week, and 2 reported reading 1-2 times per week.

Families commented that since having a home visitor, their child was more relaxed, opened up to others, had a more positive attitude, was more attentive, and enjoyed going out and playing. They said they were spending more quality time with their child, were calmer, more patient and better listeners. They appreciated help with referrals, translation, and the accessibility of their visitor “M was always a phone call away if I needed her advice.”

![Figure 1: AmeriCorps Nurtured Heart Workshop Feedback: agreement with statements of quality.](image-url)
The AmeriCorps volunteers participate in the following trainings: *Nurtured Heart* parenting; home-visitation best practices; confidentially, boundaries and safety; school readiness; mandatory child abuse reporter; preventing child abuse and neglect; and child development. They receive clinical supervision by a licensed social worker from Child Welfare Services and coaching by the FRC Manager.

![Bar chart showing satisfaction levels](chart.jpg)

**Figure 2: AmeriCorps home visitation level of satisfaction as reported by 36% of the families visited in the intensively Served Family Survey.**

**AmeriCorps Conclusions**

The AmeriCorps program has utilized volunteers to bring an array of activities to Yuba Families. They creatively expanded service locations by offering programs to foster/kinship families and Mary Mead residents. The program is challenged to work with the varied skills and strengths each volunteer brings and has annual volunteer turnover. Two of the home visitors demonstrated ability to establish trusting relationships and encourage families to more actively engage with their children. This appears to be due to the individuals’ personalities and life experience more than the training and support provided by the program. Family participation in workshops and drop-in FRC services have been relatively low, despite the many offerings and 40-hour/week FRC of operation.

**AmeriCorps Program Recommendations**

AmeriCorps volunteers have been a helpful resource for offering family friendly community events. It is questionable whether all volunteers are adequately prepared for intensive home visiting. In reviewing these findings with the FRC manager, it was learned that the program will assign volunteers this coming year to service areas that match their comfort and skills. In the FY 11-12, the program will have volunteers who are fluent in Hmong and Spanish and a father. All volunteers will enroll in either psychology or early childhood programs at Yuba College. The program will be expanding their community trainings to include teaching both English and Spanish. Staff will participate in additional home visitation training.
AmeriCorps Evaluation Methodology Recommendations

DCN and AmeriCorps staff have created a more uniform reporting tool for family support and referral services provided.
Baby Buddies Home Visiting

Program Description
Harmony Health (HH) is contracted to provide home visiting to families with children prenatal to three years of age, with priority for teen parents. The purpose is to support healthy maternal and infant development. The Family Advocates develop and implement individualized family service plans which address health insurance enrollment, medical home, nutrition education, car seat safety, breastfeeding assistance, positive parenting, workforce development and literacy. As needed, home visitors may provide referral to community services including substance abuse recovery and support, transportation support, and other services. Duration varies based on the family’s choice. Visitors do initial screening to discover participant objectives. They also bring resources and information to families in their homes drawing from various resources including Parents as Teachers. The home visitors are supervised by a clinical social worker.

In FY 10-11, FFY invested $99,541 in this program.

Clients Served & Health Goals Achieved
The program provided 575 home visits. Their clients were 98 parents from 66 families with a total of 103 children.

- During the year, 19 of the mothers gave birth. Of these mothers, 100% entered care in their first trimester, received recommended prenatal care throughout their term, and had healthy birth weight and full term babies. Support for these mothers has included emergency transportation in very early morning hours.
- Of the 34 families with babies, 88% initiated breastfeeding. This exceeds both the national average of 74%\(^1\) and the Healthy People 2020 goal of 81.9%. By the time their babies were six months of age, 34% were exclusively breastfeeding, which is less than the national average of 43.5%.
- 100% of the children in the case managed families were up-to-date in medical visits, immunizations and all had a medical home.
- All Family Advocates were trained in oral health screening and 100% of their families were trained in oral health.

Family Survey Findings
All FFY programs funded to provide intensive case management are required to survey families annually. Sixty surveys were returned representing 91% of the families served by all family advocates, of which 63% were answered in English and 37% in Spanish. Responding families represented new, ongoing and longer-term clients. (See Figure 3.)

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\(^1\) 2007-9 National Immunization Survey (NIS), CDC, NCIRD, and NCHS.

Substance abuse is the overriding factor that influences the family dynamics in the homes of our Baby Buddy children.

Roberta
Public Health Nurse
Baby Buddies Co-Team Leader
Families were asked an open-ended question regarding their personal goals for program participation. Nearly one third of the parents wanted to achieve a personal educational goal such as learning English, getting a GED or attending college. One-fifth wanted to become better parents. Others had basic needs such as housing or transportation.

Overall, there were high levels of satisfaction with the program quality.
When asked about changes in their child’s behavior since participation in the program, 38% percent indicated that the question did not apply since their child was not yet born or just an infant. Others provided examples of how the program helped their other children. “I have learned to have more patience with them and them with me. When I put them in time out they do not complain anymore.” “My daughter is responding better to me because I am able to control my frustration better.” “I read more to her and she is happier.”

When asked about changes in their behavior, 45 parents offered examples, with the most frequent comment having to do with increased patience with their child. Other direct quotes are offered below:

- I pay more attention to my child. I play with him.
- I have learned how to notice my anger triggers and to calm down a great deal so I don’t take it out on my daughter instead.
- Less procrastination.
- Better parent, taking my bipolar medications.
- I don’t hit them anymore.
- I know how to communicate better with my daughter and husband.
- I feel I am more patient with my daughter but I still need the counseling. I’m still depressed.
- I have more patience due to the classes and information I got.

When asked what changes they would suggest in the program, 32 offered comments. The most frequent comment (47%) requested that the program continue. Two asked for more Spanish counseling services or different hours of English instruction. (Program staff noted in their quarterly reports that finding and retaining volunteer EL instructors has been a challenge.)

When asked what was most helpful, the list was long and diverse.
• **Friendships and the helping information my family needed.**
• **That they help you get your goals done and give you information about the places and things around you.**
• **Having them come to the house.**
• **The information I received was very helpful and clothing donations were very helpful.**
• **Just having someone there to help as I’ve been a single parent.**
• **Having support and guidance as a new mom. This helped me immensely!**
• **One on one help.**
• **The information received from the advocates, and the help with paperwork.**
• **Parenting classes, all the unknown resources brought to my attention by the family advocates.**
• **Helping with college.**
• **Car seat safety**
• **That I was helped when I needed it.**
• **The help that was given to me so that I can help my children.**
• **The help that the workers give, the orientation, and the confidence that they give so that we can talk with them regarding things we need.**
• **Transportation**
• **Bus Passes**
• **Information about human anatomy helped me with doubts that I had regarding my 5-year-old son.**

Response to the final open ended question "Is there anything else you’d like to tell us” elicited many comments of gratitude.

• **The people or ladies are very helpful and very sweet in the program and answered all my questions as if they were friends and family.**
• **That I love the programs and keep it up so others can get help too.**
• **I really enjoy that there is a program that can help with issues you have no idea about. The transportation and information they will go out of the way and get for you.**
• **That the help that is being offered to me never goes away.**
• **We need programs like this one because they truly do help many people and it is very hard to find programs such as these especially locally. In reality these programs can help better people’s lives and keep them on the right path in life and offer them hope.**

**Focus Group Findings**

On June 28, 2011, DCN met with nine paid and volunteer staff of the Baby Buddies program to understand how the program was structured and implemented. (Focus group notes available from DCN upon request.)

**Staffing**

• A Public Health Nurse and a drug and alcohol counselor share the .25 full-time equivalent (FTE) position of Co-Team Leaders. They hosted weekly team meetings, worked with Family Advocates to problem-solve challenging cases including accompanying family advocates to homes as needed, attended interdisciplinary team meetings at Linda School, and provided 24/7 telephone coaching availability to family advocates.
• Four Family Advocates share a 1.75 full-time equivalent position. These women bring varied personal and professional experiences among which are: two with masters level training in
marriage and family therapy, completion of Parents as Teachers training, certified car-seat inspector, bilingual skills, experience as teen mother and personal recovery from substance abuse. Besides meeting with clients in their homes and at the FRC, they provide transportation and accompaniment to medical, educational and legal services when needed. The Family Advocates also have knowledge and skills in other FRC and clinic areas including counseling, medical services, lactation support, healthy families application assistance, and parent education.

- Leadership and administrative support provided by Director, Program Manager, and Administrative Assistant.
- Volunteer nurse.

What they do -

- Parent education
- Information and referral
- Goal clarification and developing realistic plans. In some cases this involves helping clients realize that they have to clear some obstacles before they can work on their ultimate goal.
- Support applying and communicating with educational, health and legal institutions.
- Transportation to appointments
- Car seat assistance

How they do it -

- Have a culture of hope and support and lifelong learning for workers and clients
- Provide highly qualified ongoing supervision and ongoing training for family advocates
- Hire Family Advocates with complement of professional and personal experiences
- Close case management
- All pregnant mothers seen in clinic are referred to FRC where they are offered an array of services and information of other community agencies. Families self refer to Baby Buddies.
- Maintain a resourceful can-do attitude. Continue to seek solutions.
- Help families identify intermediate achievable goals.

Three examples of impact:

- A father of two young children received his GED, found childcare, was able to move out of CCC housing, began family planning, and became job ready in dining services
- Isolated Spanish-speaking mom, pregnant at age 14 and CPS involved as a child was shy and depressed when first met by her Family Advocate. She was assisted to re-enroll in school and received transportation assistance for weekly high school home-study classes and for the teen mother support group. Her FA reports that she is “blossoming and proud of her developing baby.” If she can get transportation, she hopes to graduate high school in January 2012.
- An addicted mother on probation in an abusive relationship was assisted into a residential treatment program, and in securing a restraining order. She has competed treatment, found her own apartment and gave birth to a healthy baby.

Baby Buddies Conclusions
The Baby Buddies program has leveraged the Harmony Health Clinic’s medical relationships with vulnerable families. It has provided individualized holistic support for pregnant mothers.
and families with young children to make progress on an array of personal goals. The program family advocates receive highly qualified support and due to their part-time roles, also bring a variety of personal competencies to match with varied family needs. The families in the program achieved extraordinary health milestones in pre- and post-natal care, healthy births, oral health knowledge, immunization rates and initiating breastfeeding. They report high satisfaction and many have made significant progress on their personal goals.

**Baby Buddies Program Recommendations**

This program has been closed.
Baby Steps

Program Description
Yuba County Office of Education (YCOE) has a two-year contract to develop and deliver the Baby Steps program. The program promotes the 40 Developmental Assets identified by the Search Institute through training leaders in community agencies to train families. The program included a local survey and multimedia campaign. In FY 10-11, FFY invested $62,122 in this program.

Program Activities
In the November of 2010, 24 community leaders from 16 agencies were trained by the Search Institute on the essentials of assets. All participants provided feedback on the training. They identified personal goal for participation. Responses included: to develop skills to empower parents on the 40 developmental assets; to improve lives of children; to become a better service provider; to help others support children’s positive development; to learn a new tool; to strengthen their community.

Eighty-three percent said their goal was achieved “mostly” or “very much”. (See Figure 6.)

The newly trained trainers enjoyed the interactive training technique, that they received useful training materials, being reminded that little actions can make a difference, and that they were part of an asset building community. Comments included:

- Everyone is an asset builder and everyone can contribute to make a better community.
- I am very excited about delivering this to the folks I work with
- This is a strong program. It is well thought through and needs more visibility. Glad to see Yuba Co. pioneering in our region.

Figure 6: Community Leaders were asked about their goal in taking the training, and then to indicate how well it was achieved (Source: FSY Provider Survey)
In exchange for being trained, each person was asked to provide at least two community developmental asset workshops over the following two years. In this first year these community leaders offered 14 workshops which were attended by 113 other service providers and 109 parents. Seventy-four feedback forms were collected from six trainers. All participants agreed with all eight indicators of workshop quality. (See Figure 7.)

Participants committed to a variety of asset-building behaviors, of which a small sampling is offered here:

- That I have to follow the rules with my children.
- Read more to my children (repeated multiple times)
- Help my children more, commit myself to them, listen to them, support them in everything they need.
- Continue setting rules with my children and teach them values.
- Pay more attention in the attitude of my children. (repeated multiple times)
- Making my children feel important and playing in the park.
- Start Communicating - Spend more time with my daughter and husband.
- Talking more positive.
- Share the information with friends, neighbors and never think that it is not important to be nice with others.
- Limit TV screens and encourage activities.
Throughout the year, YCOE collected Search Institute surveys from 237 adults and 131 youth regarding their perceptions of how the assets are experienced in their lives. Findings have not yet been released.

The program included public and personal messaging. A professional logo was developed and designed and included in a 30 second advertisement shown in the Yuba City Theater for 26 weeks. Signage was displayed at the Gold Sox field and at 5 transit Shelters. Seventy people subscribed to weekly text messages encouraging the assets. A “Yuba Baby Steps” Facebook page has been established and has 30 active members. The assets message was seen in *Rabbit Creek Journal, Wheatland Citizen, Appeal Democrat, and the Territorial Dispatch.*

One goal of the program was for Yuba agencies to formally adopt the 40 assets. YCOE states they did not work on the objective in year one, but will do so in year two.

**Baby Steps Conclusions**

As a two-year grant, the program has successfully trained community leaders who have begun training families. Use of new technologies (Facebook and text messaging) has generated some interest. The desired outcome of workshops reaching 600 community members and community agency formal adoption of the 40 Assets will be the work of the program in FY 11-12.

**Baby Steps Recommendations**

Work aggressively early in year two to promote additional trainings and agency adoption of the 40 developmental assets.

**Baby Steps Evaluation Methodology Recommendations**

Develop link from text messages and Facebook to gather feedback from personal messaging customers.
Child Development Behavioral Specialist

Program Description
Yuba County Office of Education houses a full-time child development behavioral specialist (CDBS) who provides the following services in English and Spanish: phone consultations; home based screening, assessment and intervention services; classroom observation and support; and no-cost workshops throughout the county. She provides parenting information, coaching and modeling through age-appropriate activities. She also provides referral to over 50 other community resources. In FY 10-11, FFY invested $109,942 in this program.

Consultations
Initiated in 2007, this program is well utilized and receives referrals from many programs (24% state preschool staff, 13% private preschools, 9% parent self referral, 7% community agencies, 6% medical providers, 4% Head Start, 3% child care centers, 3% family child care providers.) Individualized telephone consultations were provided to staff from child-serving agencies regarding behavioral issues for 54 children, and to 140 families regarding their child’s behavior. Seventy-one families were given referral information on how to access other community services with 68% seeking family functioning resources, 43% seeking child development resources, and 18% seeking health resources.

Workshops
Families and child development service providers throughout Yuba County participated in seminars on child development subjects and were coached in how to provide effective positive discipline. This was provided through 33 workshops offered throughout the county (21 in English, 10 in Spanish, 2 bilingual in English and Spanish). While unduplicated participant counts are not available for the workshops, total provider attendance was 236 and parent attendance was 231, averaging fourteen participants per workshop. Of 111 workshop feedback forms collected in March through June 2011, 100% would recommend the workshop to others, 98% agreed it was a high quality workshop, and 99% reported they learned ideas that would help them with their young child (ren).

Intensive Services
Forty-six special needs children, their families and providers, received individualized child behavioral support in their homes and child development centers. Services include assessment, coaching, modeling, support and referral when requested or deemed necessary.

Children who receive in-home consultations are screened with the Temperament and Atypical Behavior Scale of Early Childhood Indicators of Developmental Dysfunction (TABS).

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2 “TABS is a norm-referenced measure of dysfunctional behavior appropriately used with infants and young children between the ages of 11 and 71 months. TABS is intended to identify children who are developing atypically or are at risk for atypical development. In addition, TABS data can indicate specific areas of concern and can be the basis for planning early intervention programs. On the TABS Assessment Tool, atypical self-regulatory behavior is assessed by 55 items in areas such as temperament, attention, attachment, social behavior, play, vocal and oral behavior, senses and movement, self-stimulation and self-injury, and neurobehavioral state. Four psychometric factors underlie the 55 items and are arranged
The screen observes 55 behaviors resulting in an indexed score that places the child as 1) normal or typical for their age, 2) at-risk, or 3) decidedly atypical. Ten of the children had post TABS assessments last year, with an average of nine visits each. Ninety percent of those children moved up a level toward more typical behavior, and all saw reduction of problem behaviors.

Figure 8: Number of CDBS children with in-home intervention services with pre- and post-TABS scores by risk for atypical development.

Provider Qualifications
The CDBS has been working with young children and their families in the Yuba/Sutter area for fifteen years, including roles as a school-site parent liaison, a Head Start family Educator, and a School Readiness Outreach Specialist. She holds a Masters Degree in Social Work, a Bachelors of Arts in Sociology, and a Associates Degree in Early Childhood Education. She is currently working on her clinical social work license.

CDBS Conclusions
The CDBS program has been effective identifying and serving families whose children demonstrate at risk or atypical behaviors. Additional, it builds families/ and early educator providers’ capacity to support healthy child development. The program is well integrated into the community, receiving referrals from over 40 agencies.

CDBS Program Recommendations
None discovered.

Evaluation Methodology Recommendations
None at this time.
Early Childhood Education Quality Improvement Program (ECE-QIP)

Program Description
Heather Maloy is contracted as an independent consultant to help increase the number of highly qualified licensed family child care providers (FCCPs) in Yuba County, with a priority for homes with capacity to serve infants and toddlers. The project began in the second quarter of FY 10-11. FFY invested $62,703 for three quarters.

Twelve FCCPs were recruited and enrolled in the ECE-QIP program, of which nine completed a Family Child Care Environmental Rating Scale (FCCERS) and developed an improvement plan. Some of the issues identified were sanitation and hand-washing, math and science curriculum; math, science, nature, diversity materials; social/emotional curriculum. The program has not responded to requests for FCCERS scores, improvement plans, materials provided to sites, professional development activities or list of contact information for FCCPs.

Eight group meetings were offered with average attendance of 6-7 providers. Topic included: an orientation, FCCERS, parent communications, quality improvement goals and parent surveys; and educational materials. FCCPs were also supported in a twelve month period with an average of nine onsite visits, and phone, email and text support. Providers were invited to bring their families to a picnic in July and a back-to-school family night in August. The program has not responded to requests for attendance records and family surveys.

The ECE-QIP consultant trained sites in the use of the Desired Results Developmental Profile and the Ages and Stages Questionnaire – Social Emotional (ASQ-SE). Half of the children enrolled in ECE-QIP sites received both of these screenings. Two children were identified for further assessment.

ECE-QIP Conclusions
In sufficient data provided. Program appears to have challenges meeting administrative requirements. FFY and DCN will continue to work with the ECE-QIP consultant and hope to have report forthcoming.

ECE-QIP Program Recommendations
Insufficient data provided to address program issues.

ECE-QIP Evaluation Methodology Recommendations
Insufficient data provided to address program issues.
Exerstations

Program Description
Yuba County Public Works was awarded a one-time $80,000 grant of which $73,186 was expended to develop activity stations for children 0-5 and their families in POW/MIA Park in Linda. On May 30th, 2011, the park opened to the public.

Exerstations Conclusions
FFY partnered with Public Works to the design and construct a public playground for young children.

Exerstations Program Recommendations
None

Exerstations Evaluation Methodology Recommendations
None
First Smiles County-Wide

Program Description
Camptonville Community Partnership (CCP) is contracted to train individuals who already serve children 0-5 on how to implement the First Smiles program. In turn, these dental health outreach workers (DHOWs) provide caries risk assessments and coach families in ways to reduce risk. The goal is to reach at least 600 families over the two-year term of the grant. FFY invested $10,295 in FY 10-11.

In FY 10-11 First Smiles trained 11 DHOWs from three agencies (Camptonville FRC, Harmony Health, AmeriCorps) who together completed 70 risk assessments and provided 82 fluoride varnish treatments. In addition to the screening and varnish treatments, DHOWs distributed 425 dental care kits to clients and at the Linda Spring Fling and at other public events. CCP reports that families are asked if they have dental insurance and a dental home. When asked, the workers provide a referral to the only two providers that accept Denti-Cal and Healthy Families in Yuba County, Lindhurst Family Health Center and the Happy Tooth Mobile. They also made referrals to 6 other providers in Butte, Nevada, Placer and Sutter Counties. CCP documented screening 122 families for health insurance coverage of which 79.5% reported having insurance. The 25 uninsured families were assisted in applying for health insurance of which 8 were known to enroll.

The program reported varied challenges including: collecting caries risk assessments from DHOWs; time and mileage to travel to sites from Camptonville; and staff turnover in partner agencies. The risk assessments which were returned were too inconsistently completed to tabulate. The FFY evaluator worked with CCP to simplify and clarify the risk assessment. The new tool was introduced in the September, 2011 DHOW training of 25 community members.

Where DHOWs lacked confidence in training families in oral health and in applying varnishes, First Smiles staff went to the sites and provided the training and applications.

First Smiles Conclusions
CCP has provided training, coaching, and follow-up to area service providers in how to do dental screening for young children and how to provide fluoride varnish. Despite limited options in the county for accessing low-cost dental services, the ambitious program goal of servicing 300 families per year through Dental Outreach Workers has fallen short and may not be a viable model to deliver these services. In the process of program implementation, CCP has discovered populations with a low rates of insurance coverage (79.5%) and low rates of successful application assistance (32%) which suggest another community need.

First Smiles Program Recommendations
Utilize revised caries risk assessment and determine and promote effective health insurance assistance and follow-up for the identified uninsured.
First Smiles Evaluation Methodology Recommendations
Analyze revised caries risk assessments and seek feedback from DHOWs trained in fall regarding their ability to apply what they learned and what they know about effective insurance application assistance.
First Steps

Program Description
Sutter-Yuba Mental Health Drug & Alcohol Program (MHDAP) received a First Five Yuba (FFY) grant to provide childcare to the children of clients in their out-patient treatment program. FFY invested $3,190 in FY 10-11.

Midyear, the program successful completed the hiring process for a classroom assistant with 24 early childhood units from Yuba College. This allowed the program to provide 80 half day child care sessions.

DCN provided an Infant and Toddler Environmental Rating Scale (ITERS) assessment which identified program strengths, which were most notably the high quality of interaction with children and parents and the promotion of listening and talking. The ITERS also offered suggestions, most notably: to improve access to and use of hand-washing; to increase access to books; and to provide more outdoor play, group activities, games, and story time.

Staff reported:

“We now have a portable sink in the childcare area which has greatly increased the amount of hand washing for both children and staff. We have also purchased two garbage cans with lids that can be lifted hands free and a bean bag sofa which has been placed in a cozy corner. We have also greatly increased the amount of structured school readiness activities through lesson plans that are designed and implemented by our new childcare assistants.”

When DCN provided the second observation, ITERS scores notable improved. (See Figure 9.)

First Step Conclusions
With a minimal investment, this program earnestly addressed a number of issues, most notably by providing additional staffing and improving hand-washing, furnishings, program structure and activities.
First Steps Program Recommendations
Continue excellent work addressing suggestions identified in ITERS.

Evaluation Methodology Recommendations
None at this time.
Gas Cards

Program Description
The Yuba County Office of Education (YCOE) has a three year grant to provide $25 gas cards to families who have to drive out of county to receive specialty medical care for their special needs child. FFY invested $5000 in this program in FY 10-11.

The program distributed 176 vouchers for 60 children, all of whom were screened and had health insurance. Thirty-six satisfaction surveys were collected with 100% reporting that they felt welcomed and respected and that the program helped them get their child needed health care.

![Survey Results](image)

The survey asked: “Do you have any suggestions or comments you would like to share with the First 5 Commission who funds this program?” Fifteen (42%) wrote in comments, all expressing gratitude. A few are included below:

- Gas cards have been a life saver for me and my special needs son. He has multiple appointments in Sacramento every month and the gas cards and FRC have really helped in making sure he gets the care he needs. Thanks so much!
- Thank you all for your love and support it is very appreciated.
- Without this program, I wouldn’t have been able to spend as much time with my daughter when she was in the hospital.
- It really helped me. It helped keep my stress level down.

YCOE contributes all the staffing costs of running the program. DCN audited staffing administrative procedures and found them thorough. In addition to F5Y requirements, Alicia Hrico, staff at YCOE FRC, collects verification from medical providers of medical conditions. Some of the special medical needs included: high risk pregnancies; blood infection; leukemia; cardiomyopathy, mucopolysaccharidosis; dental sedation; care for pre-term babies with various complications; spinal bifida; cerebral palsy, hearing delays; diabetes; liver disease.

Gas Card Conclusions
This program has played an important role in assisting 60 Yuba families to access specialty medical care not locally available for their child.
Evaluation Methodology Recommendations
No changes at this time.

Healthy Babies Healthy Parents

Program Description
Staci Howell was contracted to provide nutrition education and physical fitness awareness to Yuba County families through Healthy Babies-Healthy Parents Playgroups. The playgroups were free for all parents and their child age 3 and under. Playgroups are held in family’s homes and at community locations. Children play while parents discuss concerns, share ideas, and receive up-to-date information around nutrition and physical fitness. When parents host a playgroup they receive nutrition and physical fitness materials worth $75. FFY invested $36,226 in the program last year.

Ms. Howell recruited families from nine community partners and Facebook and Craigslist. Eight of these partners offered facilities for hosting sessions. Participants included 148 parents and 204 children. Of the twenty-two playgroups that were initiated, sixteen completed all five sessions. Reasons for incompletion included hosting challenges and low participation.

At the last session, families were asked to provide feedback through the standard FFY workshop feedback form. Eighty were collected of which 61% were in Spanish and 39% in English. Most learned of the workshop from a family or friend, but when they named the person, it was most often Veronica Lepe, one of the School Readiness Outreach Specialists. (See Figure 11.) Those that did participate were highly satisfied, would recommend the program to others, and most importantly, 92.5% report that they planned to be more physically active and prepare more healthy food. (See Figure 12.)

Figure 11: HBHP Workshop Feedback “How did you hear about this program?” n=80
Figure 12: HBHP Participant Survey Responses (n=80)

<table>
<thead>
<tr>
<th>Item</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would recommend these playgroups to others</td>
<td>75</td>
<td>41</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Ideas will help my relationship with my child</td>
<td>75</td>
<td>41</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Handouts were informative</td>
<td>75</td>
<td>41</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Plan to be more active</td>
<td>74</td>
<td>51</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Plan to improve our eating habits</td>
<td>74</td>
<td>42</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Location was convenient</td>
<td>73</td>
<td>60</td>
<td>0</td>
<td></td>
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<tr>
<td>Presentation was well organized</td>
<td>72</td>
<td>80</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Learned how to improve food choices</td>
<td>72</td>
<td>71</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>High quality informative playgroup</td>
<td>72</td>
<td>71</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Time was convenient</td>
<td>70</td>
<td>10</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Learned to prevent cavities</td>
<td>69</td>
<td>10</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Learned what to expect of my child</td>
<td>69</td>
<td>10</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Plan to set a routine</td>
<td>68</td>
<td>12</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Met other parents</td>
<td>66</td>
<td>9</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Learned of another community resource</td>
<td>65</td>
<td>14</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

HBHP Conclusions
This program overcame the challenges of providing health education in homes by linking with other service providers. Participants report high satisfaction and intent to improve nutrition and physical activity.

HBHP Program Recommendations
This program is no longer being funded.

HBHP Evaluation Methodology Recommendations
If a similar program is funded in the future, assess actual physical activity and nutrition behaviors upon participant initiation and termination.
Linked

Program Description
Salvation Army Depot Family Crisis Center was contracted to extend its mental health, childcare, and health access services for families that are pregnant or have children 0-5. The Depot serves families experiencing and recovering from homelessness and addiction. FFY invested $13,668 in FY 10-11. This represents a 61% reduction from their original approved grant. In their quarterly reporting, the Salvation Army reports that they 1) had less than anticipated enrollments and 2) the program behavioral health counselor had limited availability to provide additional hours.

Despite their counselor’s limited availability, the program did provide 88 hours of supplemental counseling. The child care program was assessed using the revised Family Child Care Environmental Rating Scale (FCCERS-R) from which recommendations were developed and shared with program staff. The follow-up assessment will be done in FY 11-12.

The childcare provider was trained in use of the Ages and Stages Social Emotional Developmental screening tool. She worked with parents to screen 22 young children. One of these children was identified and referred for additional assessment. All 25 children had health insurance and up-to-date immunizations. The program provided bus tickets for medical appointments to all families. In the course of the year, only a quarter (six) of the children saw a dentist. The program reported challenges finding dentists willing to accept Medi-Cal. FFY encouraged the program to utilize the Dental Van which by fourth quarter, proved successful.

Nine parents of young children completed the program and submitted a FFY Intensively Served Family Survey. Some of the stated goals for program participation included:

- Mine and my wife’s goal was to learn tools to be better parents and how to stay sober.
- To get out on my own with my family in our own house.
- My goal was to regain my family back and I have because of the program.
- To live a better life.
- Stop Biting
- Get a house, job and a car.
- Better attitude towards positive change

Families completing the program
Linked Conclusions
Like all residential treatment programs, Linked is working with families facing multiple challenges. Staff has been very open to suggestions for accessing dental care, upgrading the child care environment, and providing mental health screening for young children.

Linked Program Recommendations
Continue to work on FCCRs recommendations.

Linked Evaluation Methodology Recommendations
Continue with plans to convene parent focus group and second FCCRS assessment in FY 11-12.
NAP SACC

Program Description
The Twin Cities Association for the Education of Young Children (TCAEYC) is contracted to train Yuba County child care providers in the use of the evidence-based Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) program. Last year the program trained 10 child care providers in use of the tool, visited the sites, and helped staff to develop action plans. In addition to working intensively with these locations, the program offered four community workshops open to any interested provider or family. Over three years they hope to improve nutrition and physical activity policies and practices in these and other centers, indirectly reaching 400 parents and 440 children. FFY invested $36,562 in FY 10-11.

Ninety percent of the childcare providers completed the program, one of the two family child care program closed, and the Wheatland Head Start closed with key staff moving to the Sunrise Head Start Center. A total of 174 children were enrolled in participating programs.

The NAP SACC assessment asks each center to report program practices on 54 measures. Pre- and post-assessments were collected from eight sites. In order to analyze changes, each narrative response was assigned a numeric value from 0-3, with three being the most desirable practice. Initially, the lowest aggregate scores were in physical activity policies, nutrition education and physical activity education. These three practices saw the greatest gains between pre- and post-assessments. By the end of the year, the three highest performing areas for the nine sites were highest performing were feeding practices, offering of fruits and vegetables, and supporting physical activity. (See Figure 15.)

Average scores dropped in the 2 areas of nutrition policies (adherence to comprehensive written nutrition policy) and foods offered outside regular meal and snack times (holiday and celebration guidelines, non-food rewards and incentives, non-food fundraising sales.) When examining the data it was found that in these two categories more sites selected "not-applicable.” There appears to be resistance to formalize nutritional policies and to enforce change in the culture of celebrations with food treats.

DCN, FFY and NAP SACC staff met in June 2011. NAP SACC staff observed that while the assessment tool examines classroom level practices, when they work with one classroom at a center, it typically results in improvements for all the food and physical activity offerings throughout the center.
Four of the NAP SACC centers installed gardens at their school sites.
NAP SACC also provided four community workshops. From these, 53 feedback forms were collected. Participants indicated their level of agreement on 10 indicators of program quality. (See 518.)

![Bar chart showing participant responses to various feedback questions.](image)

**Figure 15: NAP SACC Community Workshop Feedback. n=53**

When asked, participants offered a long list of what they found most informative. Several examples are offered below:

- *The length of time the children need physical activity per day, have children not watch so much TV and do more physical activities. “I will now incorporate more physical activities in our daily curriculum.”* (6x)
- *Read labels at the back before buying “know what you are putting in your family’s mouth”* (5x)
- *How to share this information with parents, visual resources for parents and handouts for information.* (5x)
- *Group examples such as the obstacle course* (4x)
- *Amount of sugar in drinks. “Rethink your Drink. My kids love Sunny D and Gatorade. I unfortunately drink soda. Kinda scary to think about the amount of sugar we consume.”* (4x)
- *Sort products by category and think about what is in it.*
- *Menu variety*
- *How to access resources*
- *That 1 out of 4 children are obese and most the time you can’t tell*
• Three types of physical activity: loco-motor; manipulative, non-manipulative. Swings are good for rest between – balance
• The way physical activity in academically related

Less participants offered suggestions. Some wanted even more activities. One requested equipment for large motor play. The final open ended question “Do you have any other comments” generated many “thank yous”.

NAP SACC Conclusions
NAP SACC helps child care providers focus on very specific ways that they can promote good nutrition and physical activity. Participating providers significantly improved their nutrition and physical activity environments, most notably in the adoption of physical activity policies, providing nutrition education in the classroom, and providing physical activity education. Adhering to the policies will require ongoing commitment of staff. Community workshops were well received, with appreciation for their participatory style and resources and activities that providers could use at their sites and with their families.

NAP SACC Program Recommendations
The program could have the greatest impact if they recruit and give priority to classrooms that are from centers that have not already participated in NAP SACC. Given site attrition, if the program is to meet their goal of impacting 30 classrooms and 440 children in three years, the program will have to initially enroll more than 10 classrooms per year. Promotion of adoption and adherence to center-wide nutrition and physical activity policies will leverage coaching provided at the classroom provider level.

NAP SACC Evaluation Methodology Recommendations
The NAP SACC assessment is a powerful and constructive tool that measures changes in behaviors, environments and policies. No recommended changes.
Plumas Lake Physical Activity

Program Description
The Yuba County Office of Education (YCOE) received a one-time FFY grant to purchase and install age appropriate playground equipment at the Plumas Lake Child Development Center (PL-CDC) and to implement a physical activity curriculum for the 160 children enrolled. FFY invested $14,856.

PL-CDC purchased the equipment which was installed with abundant volunteer labor from staff, parents, a local church and Beale Air Force Base. The playground has been enhanced by ADA compliant ramp, mulch and a shade structure. Staff reports that parents often stay after the program to allow children further play.

The program also purchased a curriculum called “The Great Body Shop” which teachers reported offered useful ideas, songs, activities and newsletter templates to further engage families.

PL-CDC wanted to demonstrate their children’s physical development. Children were assessed using the gross motor section of the Revised Desired Results Developmental Profile (DRDP-R) in the fall and again in the spring with virtually all children achieving “building” or “integrating” by the end of the year.

Figure 16: Plumas Lake Child Development Center assessed each child’s gross motor and balance skills using that section of the DRDP-R. The assessment ranks gross motor skills on a scale from “exploring” to fully “integrating” for three and four year old children. Fully 50% of the children moved from a lower level to “integrating”, all children either “building” or “integrating” by the second assessment. n=97

Plumas Lake Physical Activity Program Conclusions
With YCOE and PL-CDC, FFY has helped construct another shaded outdoor playground used by young children. The PL-CDC program staff have developed and implemented classroom activities that promote physical activity.
Plumas Lake Program Recommendations
This was a one-time grant. No recommendations.

Plumas Lake Evaluation Methodology Recommendations
This was a one-time grant. No recommendations.
Recreation Coordinator

Program Description

Yuba County Public Works (PW) has two contracts to develop a Yuba County recreation program. The first contract began in July 2008 and extended through June 2011. This contract was for PW to promote and offer expanded recreation activities for children 0-3 and their families. The second contract began July 2010 and extends through June 2012. This contract expanded the scope to include children 4-5 and their families. FFY invested $108,500 in FY 10-11.

Last year 21 course titles were offered to children 0-5 and their families in a total of 139 sessions. Most of these are weekly sessions from 30 minutes to one hour each. Eighty-two children age three or under and another 278 four to five years of age participated in the recreation programs.

Public Works surveyed participant families at the last session of workshop series. For the five quarters from June 2010 through September 2011, 162 surveys were returned. Eighty-percent (130) were from the summer aquatics program, 12.3% (20) from Ballet/Jazz Combo, 6.2% (10) from gymnastics, and two surveys from Kid Fit. Ninety-one percent were Yuba County residents. Thirty-four percent were responding for a child age six or older. Sixty percent were responding for a preschool-age child, and 6% for a toddler, age 1-2 years.

Overall, 98% agreed or strongly agreed that their child enjoyed the program, that the instructor was well organized, and that they’d recommend it to others. (See Figure 15.) The 12-15% who did not find the time and location convenient were enrolled in the swimming program which was relocated at this past year to the OPUD facility in Olivehurst after Marysville Joint Unified School District increased its facilities fees by 25%.

While fees are charged for most classes, the program offered free activities at the Marysville Farmers Market and a Frisbee tournament at the Olivehurst chili cook-off. Additionally, 67 children ages 0-5 were awarded $4300 in scholarships.

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3 As reported in Recreation Coordinator Milestones.
The program has been challenged by: three staffing changes in its coordinator position; development of a consistent and effective marketing approach; and the costs associated with marketing, facilities and contracting swim instructors. Despite challenges, PW has: sought and found new partners such as the Yuba-Sutter Training Zone for staffing; developed an online catalog and registration process, and improved its internal record keeping practices.

![Bar Chart]

Figure 17: Level of agreement with program quality statements in recreation program surveys collected during the five quarters from July 2010 through September 2011. (n=162)

Recreation Coordinator Conclusions
With FFY support, Yuba County has a core of public recreational programs for all ages. Development of programs for infants and toddlers has had modest success. Programs for preschool and older children are finding an appreciative following.

Recreation Coordinator Program Recommendations
Increasing program enrollments through effective marketing will be critical in this final year of the grant.

Recreation Coordinator Evaluation Methodology Recommendations
Offer option of online survey collection.
School Readiness Initiative

Program Description
Marysville Joint Unified School District (MJUSD) and FFY jointly administer and fund the School Readiness Initiative (SR) which provides services to young children and their families residing in three elementary school catchment areas: Cedar Lane, Ella and Linda Elementary Schools. The SR staff includes a full-time health specialist, three full-time Outreach Specialists (OS), and six 4-week summer preschool and kindergarten teachers. MJUSD provides in-kind fiscal and program oversight, custodial services, facilities, and nutrition services. The commission provides a .25 SR Coordinator. The theory of change is that: a) by providing health screening, access to health services, and health education; and b) by offering an array of activities that help parents become active in their child’s education through learning at home; and c) by offering take-home books to all state preschool and home-visited families; and d) by helping parents build social connections with other parents and elementary school staff; and e) by ensuring that at least a 4-week preschool experience is available for all incoming kindergarten students; then a school culture supportive of early learning will be formed and students at the target schools will have greater academic achievement. The FY 10-11 program budget includes a MJUSD annual investment of $124,000 with an additional $98,785 in-kind. FFY expended $108,039 of its budgeted allocation of $ 115,747, with additional $25,000 in kind.

The Outreach Specialists coordinated 373 parent workshops this past fiscal year. These workshops were available for any family living in the catchment area of the three target schools who was pregnant or had a child age 0-5 years. The programs offered included:

- Weekly family literacy workshops provided by the Outreach Specialists using Raising a Reader (RAR) and Let’s Read Together (LRT) curricula.
- Nutrition and physical activity workshops.
- Weekly parent drop-in workshops and presentations on various topics including: the KVIE Read to Learn program; guest nutrition speakers from U. C. Davis; the Child Development Behavioral Specialist; school principals; Healthy Babies Healthy Parents; health issues; nutrition and physical activity; and other community issues.

School Readiness Workshops

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td># SR Workshops</td>
<td>373</td>
</tr>
<tr>
<td># Hours of workshops</td>
<td>464</td>
</tr>
<tr>
<td># Total participant hours</td>
<td>807,549</td>
</tr>
<tr>
<td>Average # participants/session</td>
<td>14</td>
</tr>
<tr>
<td>#/% Workshops offered in English</td>
<td>357/95.7%</td>
</tr>
<tr>
<td>#/% Workshops offered in Spanish</td>
<td>366/98.1%</td>
</tr>
<tr>
<td>#/% Workshops offered in Hmong</td>
<td>16/4.3%</td>
</tr>
</tbody>
</table>

Table 1: School Readiness Workshops offered in FY 10-11, by number offered, total workshop hours, total participant hours, and language. Source: School Readiness Milestones reports.
Since the literacy, nutrition and physical activity workshops were ongoing series, participants were asked to complete a feedback survey. In all three content areas there was a very high level of satisfaction and a belief that the content would help them in their role as parents. (See figures below.)

Families participating in the family literacy workshops were asked to respond to a feedback survey:

- 94.5% of families participating in the family literacy workshops reported reading or sharing books with their children more than three times per week, with 59% reporting daily reading.
- All of the participants in the physical activity workshops agreed that they were getting more exercise and were seeing that their children had daily exercise.
- All of the participants in the nutrition workshops found it had changed the way they shopped and planned meals.

**Frequency of Reading at Home**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every day (6-7x/week)</td>
<td>1.9%</td>
</tr>
<tr>
<td>Frequently (3-5x/week)</td>
<td>35.2%</td>
</tr>
<tr>
<td>Once in a while (1-2x/week)</td>
<td>59.3%</td>
</tr>
<tr>
<td>No regular reading schedule</td>
<td>3.7%</td>
</tr>
</tbody>
</table>

**Figure 18: School Readiness Workshops by Type offered in FY 10-11. Source: SR Milestones.**
Each survey ended with an open-ended question, “Please provide any suggestions or other comments.” Comments expressed appreciation, and a desire for more help learning English and ongoing access to children’s books. Selected comments are found below.

- *This program has helped me learn alongside my children. On a personal level it is a struggle learning and understanding English.*
- *I (strongly agree) it is very important to read with our children. I ask for help in the adult program to learn English. ESL.*
- *I would like there to be more materials available so that we can continue helping our children. Our children learn a lot with these books.*
- *It is very good because we read with our children on a daily basis and we need to learn English so that we can help more.*
- *I really liked this workshop, I never used to read to my children and now I enjoy reading to them. Hopefully next year these workshops will be available more days of the week.*
- *For there to be more Spanish books for our children who are Bi-lingual*
- *I would like to give thanks for the workshops, information, and for the attention that was given to the parents.*

Workshops also addressed parental and child physical activity. The US Center for Disease Control and Prevention sited Yuba as one of the five California counties with the highest obesity rates, which is greater than 30%. Thirty percent of the SR parent workshops were focused on adult and child physical activity. Again, through a feedback form, participants expressed a high level of satisfaction with the programs which varied across sites and included: a morning parents walking group called “Whistle Walkers” at Cedar Lane; Zumba classes at

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4 DCN asked SR staff about ESL classes and learned that due to budget shortfalls, the classes are now seventy-five dollars. OS indicated that it is no longer affordable for some of their families.

Linda School; a dance class at Ella School provided by their physical education teacher. Comments included:

- Thank you to the program because it has helped us lose weight and thank you to the individuals who motivated us to continue attending the workshops.
- It is good to learn and practice at least 30 minutes of exercise. These workshops should continue.
- I personally enjoyed the walks, dance moves, and movements that were taught to us on Fridays.
- The walking workshop was really good, one feels better after.
- For these classes to occur every day of the week and if this program could be extended so that the English classes could continue without any costs.
- Thank you for your help, I would like to continue counting on you because I know that with your help I will be a better parent.

**Physical Activity Workshop Levels of Agreement**

![Graph showing levels of agreement on various statements related to physical activity workshops.]

*Figure 21: Physical Activity Workshops.* The survey asked participants to indicate their level of agreement with the statements listed. (Source: FFY Workshop Feedback Forms, 98% of the 63 surveys were in Spanish.)

Twenty-four percent of the parent workshops addressed nutrition. These included workshops offered by U.C. Davis Extension staff and through the FFY Healthy Babies Healthy Parents program, which included a series offered in Hmong. Comments included:

- I really liked this workshop. I learned a lot of new things to cook.
- This workshop helped me how to feed my family with less money and better nutrition. I would like that you continue supporting this for next year.
- It is good to learn how to eat healthy. We would also like to learn English.
Nutrition Workshop Levels of Agreement

- I would recommend these workshops
- This workshop will help me be a better parent
- I look forward to attending
- I am a more careful shopper since attending...
- I think about food groups when planning meals...
- Workshops gave me ideas on how to provide...

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

- Strongly Agree  - Agree  - Somewhat  - Disagree  - Strongly Disagree

Figure 22: Nutrition Workshops. The survey asked participants to indicate their level of agreement with the statements listed. (Source: FFY Workshop Feedback Forms, 95% of the 61 surveys were in Spanish.)

Parents as Teachers Home Visitation

Each Outreach Specialist worked with ten families using the evidence-based Parents as Teachers curriculum. The OS meets with the parent and her child at the family home or at the school site. The OS provides developmentally appropriate activities and children’s literature. Over the course of the school year 30 families were served with 399 sessions. Families qualify to participate in this intensive parent coaching program by self-screening with positive responses to at least six of the following statements:

- Children in my neighborhood attend Ella, Cedar Lane or Linda Elementary School
- I am pregnant or have children under age 6.
- I want to learn to be the best parent I can be.
- I want to and can spend 2—5 hours per month with a child specialist to learn new activities to do with my child.
- My childhood family had big challenges. (Like violence, substance abuse, homelessness, foster care, etc.)
- I have had big challenges (like violence, substance abuse, homelessness, etc.)
- My child qualifies for MediCal, Healthy Families or Healthy Kids health insurance

At completion, all families were asked to provide feedback using the Intensively Served Family Survey. Surveys were returned for all 31 families, 42% in English and 58% in Spanish. Some key survey results include:
Participants Read at Home - When asked how often the share books with their child, 60% reported reading daily, 22% reported frequent reading of 3-5 times per week, and only two (7%) reported infrequent or no regular reading time.

Referral Source - Most (80%) participants found out about the PAT program from a child professional. 7% from a friend or family member and another 7% from a flyer. One learned about it from Harmony Health Clinic.

Personal Goals Achieved - When asked about their personal goal for enrolling, most responses were related to parenting (e.g. “to understand and educate myself on the growth of my baby”; “to learn things that will help me with my family”) and some were related to their child’s development, “for my child to be more social with other children, how to learn better and understand the rule.” All reported that their goal was achieved either fully (70%) or mostly (30%).

Clear, Useful, Consistent - All agreed they were informed about the purpose of the program (97% “strongly”), that information was clearly presented (100% “strongly”), suggestions were useful (97% “strongly”), and their confidence as a parent increased through participation in the program (93% “strongly”), their relationship with their child improved (93% “strongly”), and they learned how to access community resources (97% “strongly”). Families reported frequent contact with their home visitor with 44% reporting 11-20 contacts and 52% reporting more than 20 contacts.

Child Development – Eighty-seven percent of parents offered examples of how their child changed since starting the program. A few comments are listed below:

- The behavior of my daughter has improved, she is more talkative and friendly
- She is more independent, likes to ask questions while reading. She is more social.
- He can interact with other children, follow instructions and does not have as many fits.
- They have learned various abilities like cutting, coloring, socializing, sharing, and being more independent.
- “M” recommended me to Thelma Amaya and she helped me a lot with my son and I feel more secure/safe.
- This has helped my child in his numbers, alphabets, colors and much more.

Parents Behavior Changed – Fifty-eight percent of parents offered examples of how their behavior had changes as result of the program. A few comments are listed below:

- I learned how to be more tolerant and understanding of my children.
- It has helped me gain friendships and learn how to be a better mother to help support my children.
- I learned discipline techniques, how children learn to relate with others, and how they develop.
- I have more patience in reading and explaining that I did before.
Suggested Program Changes – When asked what changes they would like to see with the program most suggestions were for more workshops and greater frequency (e.g. “for this program to be 5 days a week”). Some simply asked in various ways to continue to offer the program: “Leave the program as it is, our children have learned so much from this program.” The only additional ideas suggested were funds for more outings, field trips and camping trips.

Most Helpful – When asked what aspects of the program were most helpful, the most cited aspect was the information presented. Some comments were wide sweeping “everything”, “the information”; some mentioned access to resources “materials for our children”, and other were quite personal “Even though I am a mother, I was not much of an expert as I am now, thanks to the workshops. Now I have a lot of friends, almost like sisters.”

Gratitude & Books – The final question simply asked if there was anything else they’d like to say. The most frequent phrase was “Thank You”, followed by comments about the outreach specialists: “I have enjoyed all the parents and Ms. Rina’s kindness and guidance.” “I have never attended classes like these before, until my child attended this school. I have learned a lot from Maria.” “Thank the teacher Veronica, she motivates us to do activities with our children.” The only specific suggestion was “to approve in having more books so that there are different books to read for those who don’t have time to go to the library or other places to look for books.”

Raising a Reader
Raising a Reader is an evidence-based literacy program which provides take-home books at the target school state preschools and for the families participating in the Parents as Teachers program. It includes workshops to train parents in read-aloud strategies.

The Health Specialist
The Health Specialist screens home visited families, state preschool students, all KinderCamp and incoming kindergarten children for complete immunizations, vision, amblyopic (lazy eye), hearing, body mass index, oral health and TB. Families are assisted as needed in enrolling in health insurance programs. She also provides workshops on health topics. In cases of individual child health needs, the HS works with the family to secure appropriate accommodations and to overcome barriers to accessing services (such as transportation.)

Body mass index screenings found 42% of the children overweight or obese. This is significantly higher than the already alarming 33% rate for low-income preschool children reported nationally but much improved from the 49% overweight or obese rate observed in the fall of 2009.

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6 [www.cdc.gov/obesity/childhood/lowincome.html](http://www.cdc.gov/obesity/childhood/lowincome.html)
In the spring, health screenings are offered to all preschool and PAT families. Peach Tree clinic and OS staff assist in this event. For the first time, all TB tests were negative. Over half the children screened were referred to the Dental Van for dental care, with highest referral rates at Linda School (70%) and lowest referral rates at Cedar Lane (22%).

<table>
<thead>
<tr>
<th>Linda</th>
<th>Ella</th>
<th>Cedar Lane</th>
<th>TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision</td>
<td>42</td>
<td>46</td>
<td>43</td>
</tr>
<tr>
<td>Hearing</td>
<td>43</td>
<td>46</td>
<td>41</td>
</tr>
<tr>
<td>Dental</td>
<td>43</td>
<td>46</td>
<td>41</td>
</tr>
<tr>
<td>TB</td>
<td>33</td>
<td>35</td>
<td>30</td>
</tr>
</tbody>
</table>

Table 3: Number of children screened and percent identified for further treatment by school readiness program in FY 10-11

KinderCamp

KinderCamp is a high quality half-day (4.5 hour) preschool program offered daily for four weeks at each of the SR sites. MJUSD recruited and hired certified teachers who were either kindergarten teachers or had prior SR KinderCamp teaching experience. The 2010 summer program reached 137 children of which 38% had no prior preschool experience and 58% for whom English was not their primary language.
Other

Besides the specific programmatic roles that the Outreach Specialists and Health Specialists provide, families turn to them to learn how to access other community resources, including preparing and filing application and school forms.

SR Conclusions

The Yuba SR program has become a resource for families with young children in the target schools. Families enjoy and participate in workshops. Parents learn and improve their eating and exercise habits. Children receive health screens and their families are assisted in accessing community resources, most notably the Dental Van. Fifty-two children had their first preschool experience through the high quality summer KinderCamp.
SR Program Recommendations
Build upon the excellent relationships established by program staff with families. Consider how the workshops can continue to build parental self-efficacy in more ways. (English language competency, micro-enterprise, and service to school community.)

SR Evaluation Methodology Recommendations
Analyze child obesity rates by parental participation in nutrition and physical activity workshops. DCN suggested reducing number of feedback forms collected from families but Outreach Specialists asked that they not be discontinued as they look forward to reviewing feedback.
Systems Findings

Each major grantee reported how it leveraged resources and collaborated with other community partners.

Collaboration
Grantees named 140 collaborating agencies, including county and non-profit agencies, private businesses, the media, educational and training institutions, partners from adjacent counties, and Beale Air Force Base. (See Figure 25.)

![Figure 25: Number of Collaborating Agencies and Community Partners](FFY Major Grantees Quarterly Milestones.)

Leveraged Resources
All programs were asked to report how their FFY grant helped them leverage additional resources. The largest reported area was how in other grants that supported the program. Next highest reported area was in volunteer hours. Often these were parent and staff that donated...
unpaid labor and skills. In some cases these were provided by community groups.

Based on these reported leveraged resources, grantees provided a 50% match to the commissions investments through supplemental fundraising, volunteer recruitment and supervision, professional services provided by private or public agencies, donated materials, use of facilities, donated program materials, collection of donated resources for families and translation services.

Figure 26: Reported Leveraged Resources by category as reported by FFY Grantees

Figure 27: FFY's investment of nearly $.9M was met by nearly $.5M in additional resources to support the programs and the families they served.
Supplemental Findings

The scope of DCN’s evaluation was primarily to report on the major grants as seen in the Program Findings section of this report. As a summary document this section includes updates on provision of health insurance, dental van and mini-grants and other investments are noted.

Healthy Kids Insurance Premiums
FFY invested $27,540 in Healthy Kids insurance premiums for 23 children.

Fluoridation
FFY invested $109,240 to include fluoridation in the Olivehurst Public Utility District water supply which serves 5670 households. Of that $19,534 was contributed in FY 10-11.

“Happy Tooth-Mobile” Dental Van

In 2007 First Five Yuba purchased a self-contained dental van to provide comprehensive dentistry to children 0-5 and their families at school sites in Yuba County.

This mobile state-of-the-art, full service dental clinic offers oral exams, x-rays, dental cleaning, preventive dental procedures along with individual oral hygiene instruction. Available dental procedures include fillings, baby root canal treatments, extractions and sealants. Marysville Joint Unified School District provides coordination, outreach, and maintenance of the van. Peach Tree Healthcare operates and staffs the van with a bilingual dentist and assistant.

In FY 10-11 the program provided 1072 appointments for 385 children 0-5.
**Mini-Grants**

FFY provided awarded $31,000 in 17 mini-grants to 14 area agencies and individuals to benefit children and families.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Purpose</th>
<th>Awarded Amount</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Fun Environment</td>
<td>To improve outdoor activities with the purchase of a swing set.</td>
<td>$1,256</td>
<td>Irma Villagomez</td>
</tr>
<tr>
<td>April-Month of the Child 2011</td>
<td>April’s Month of the Child activities.</td>
<td>$2,500</td>
<td>Twin Cities Association for the Education of Young Children</td>
</tr>
<tr>
<td>Baby Boot Camp</td>
<td>Baby Boot Camp is stroller fitness for parents and caregivers. Each class focused on cardio, strength, stretching and core. All participants were also be offered Nutrition Solutions classes. Contract July 1, 2010 through June 30, 2011 for $2,500.</td>
<td>$2,500</td>
<td>Jill Wheaton</td>
</tr>
<tr>
<td>Bridge to the Outdoors</td>
<td>To purchase items geared for an outdoor classroom environment.</td>
<td>$1,500</td>
<td>Wheatland School District</td>
</tr>
<tr>
<td>Child Health &amp; Safety</td>
<td>To introduce healthy and safety materials for children activities, according to the education requirements for children 0-5 years.</td>
<td>$500</td>
<td>Early Care &amp; Education Program</td>
</tr>
<tr>
<td>Create a Garden</td>
<td>To build a garden, start compost, and create an outdoor play Farmer’s Market. Enhance curriculum with gardening and nutrition books.</td>
<td>$1,500</td>
<td>ECenter Head Start-Olivehurst Site</td>
</tr>
<tr>
<td>Curriculum Enhancement for Connie’s Critters</td>
<td>To purchase curriculum materials and equipment for children 0-5.</td>
<td>$611</td>
<td>Connie’s Critters Family Childcare</td>
</tr>
<tr>
<td>First Five Read and Learn</td>
<td>To provide books to children at each well baby checkup so their parents can read to them.</td>
<td>$1,500</td>
<td>Peach Tree Healthcare</td>
</tr>
<tr>
<td>First Teachers® Community Workshops</td>
<td>To provide interactive community workshops to educate families on the value and importance of being their children's “first teachers” with a goal to overcome barriers to reading aloud to their children.</td>
<td>$2,500</td>
<td>Staci Howell, Bring Me A Book</td>
</tr>
<tr>
<td>Marysville Friday Night Market: Children’s Area</td>
<td>A collaborative project supported by volunteers and sponsors with a goal to provide a safe, free, age appropriate weekly events.</td>
<td>$2,500</td>
<td>Marysville Business Improvement District</td>
</tr>
<tr>
<td>Project Name</td>
<td>Description</td>
<td>Amount</td>
<td>Recipient</td>
</tr>
<tr>
<td>------------------------------------</td>
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<tr>
<td>Mommy/Daddy Dolls</td>
<td>To purchase materials to construct Mommy and Daddy Dolls which consist of a picture of the deployed parent for their child’s use to ease their separation anxiety when Mom or Dad is deployed.</td>
<td>$1,463</td>
<td>Tri Counties Blue Star Moms</td>
</tr>
<tr>
<td>Outdoor Classroom</td>
<td>To purchase items to build an outdoor classroom.</td>
<td>$1,500</td>
<td>Wheatland School District Child Development (Lonetree Site)</td>
</tr>
<tr>
<td>Ponderosa Park Ball Field Restoration</td>
<td>To restore the infield of the lower multipurpose baseball field in order to bring little league games back to the children of the upper foothills area.</td>
<td>$2,500</td>
<td>Yuba Feather Community Services, Inc.</td>
</tr>
<tr>
<td>Spring Fling 2011</td>
<td>To provide a health and safety fair for the community of Linda showcasing over 20 public service agencies and providing resources for families.</td>
<td>$2,500</td>
<td>Harmony Health Family Resource Center</td>
</tr>
<tr>
<td>Teen Parent and Child Brochure</td>
<td>To update, print and distribute “Pregnant &amp; Parenting Teens-Places to Go for Help &amp; Information” brochure detailing programs and services available for pregnant and parenting teens and their children in the Yuba Sutter area.</td>
<td>$1,137</td>
<td>Child Care Planning Council of Yuba &amp; Sutter Counties</td>
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<tr>
<td>Training for Early Care and Education Providers</td>
<td>To provide two trainings for the early care and education workforce to build knowledge and skills associated with working with infants, toddlers, preschoolers, children with special needs and second language learners.</td>
<td>$2,500</td>
<td>Child Care Planning Council of Yuba &amp; Sutter Counties</td>
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<tr>
<td>Yuba County FRC Network Collaboration</td>
<td>Coordination for Yuba County FRC Network.</td>
<td>$2,500</td>
<td>Yuba County Office of Education</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>$30,967</strong></td>
<td></td>
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