

# Strategic Plan

## 2020-2025



Plumas County Children and Families Commission

## ACKNOWLEDGEMENTS

This strategic plan was developed through a collaborative process that involved First 5 Plumas Commissioners, community partners, stakeholders, and the public.

Thank you for your commitment of time and ideas in support of a plan that addresses the needs of our youngest children and their families.

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Parent Representative

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*Social Entrepreneurs, Inc., a company dedicated to improving the lives of people by helping organizations realize their potential, provided support in the development of this plan.*

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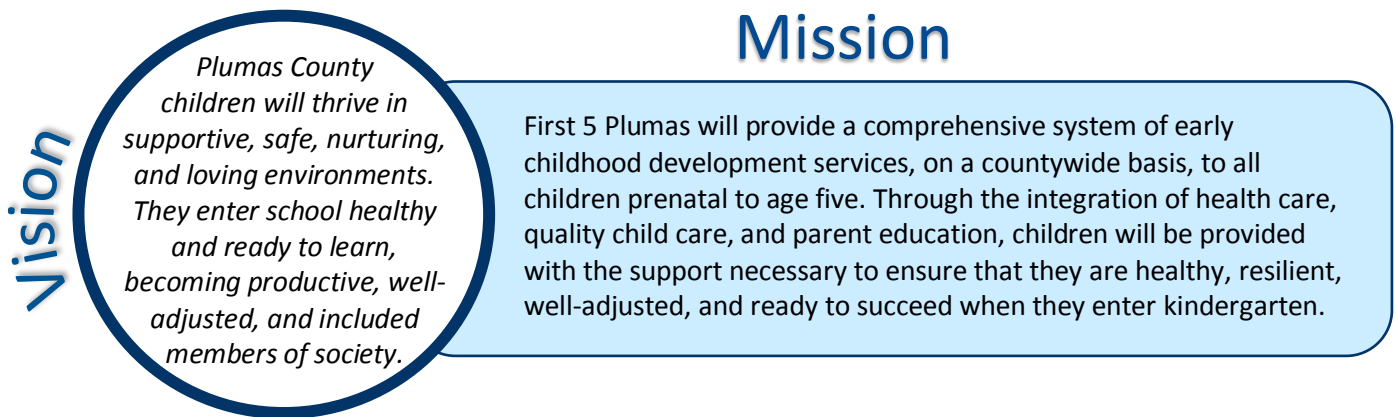
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## EXECUTIVE SUMMARY

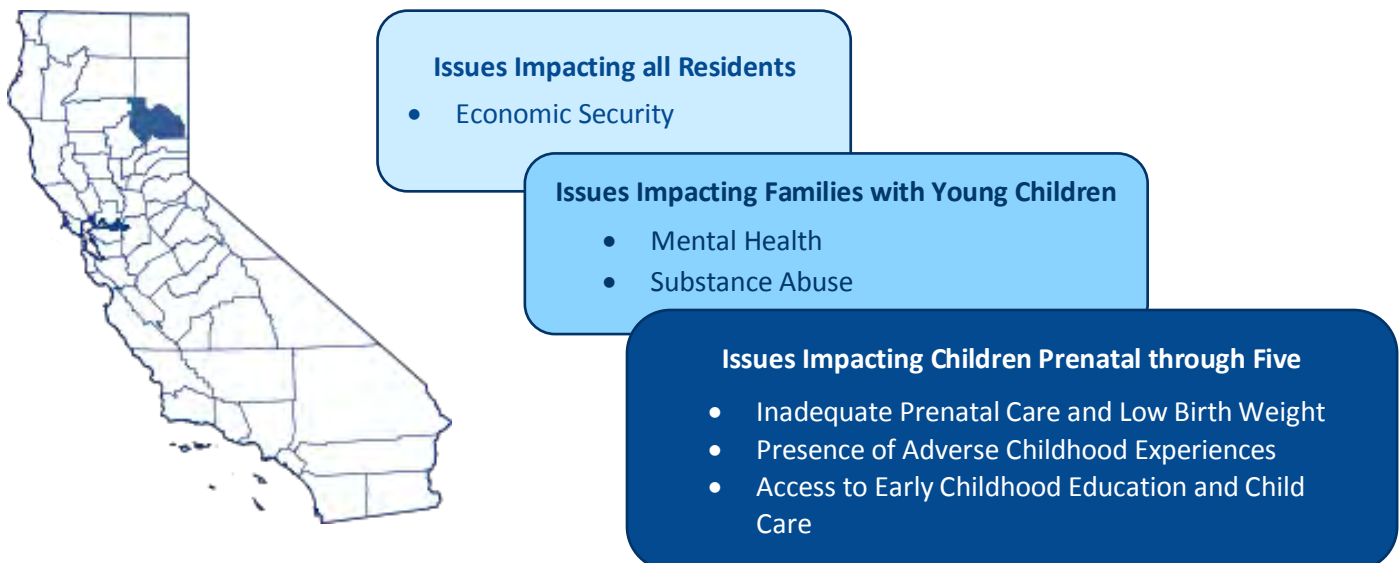
In October 2019, the First 5 Plumas Children and Families Commission embarked upon a process to update its strategic plan as mandated by the legislation that created First 5 Commissions across California.

*Proposition 10: Requires all county commissions to “adopt an adequate and complete County Strategic Plan for the support and improvement of early childhood development within the county. The strategic plan must include a description of the goals and objectives proposed to be attained, a description of the programs, services, and projects proposed to be provided, sponsored or facilitated; and a description of how measurable results of such programs, services, and projects will be determined by the County Commission using appropriate and reliable indicators.”*

The strategic plan is meant to effectively guide the Commission in its efforts to realize its vision and achieve its mission.



The strategic planning process began with an assessment of needs, trends, and the current environment. Publicly available data was collected on the indicators that were identified as important to help inform the strategic planning process. The following issues were found to be most relevant to the Commission’s charge.

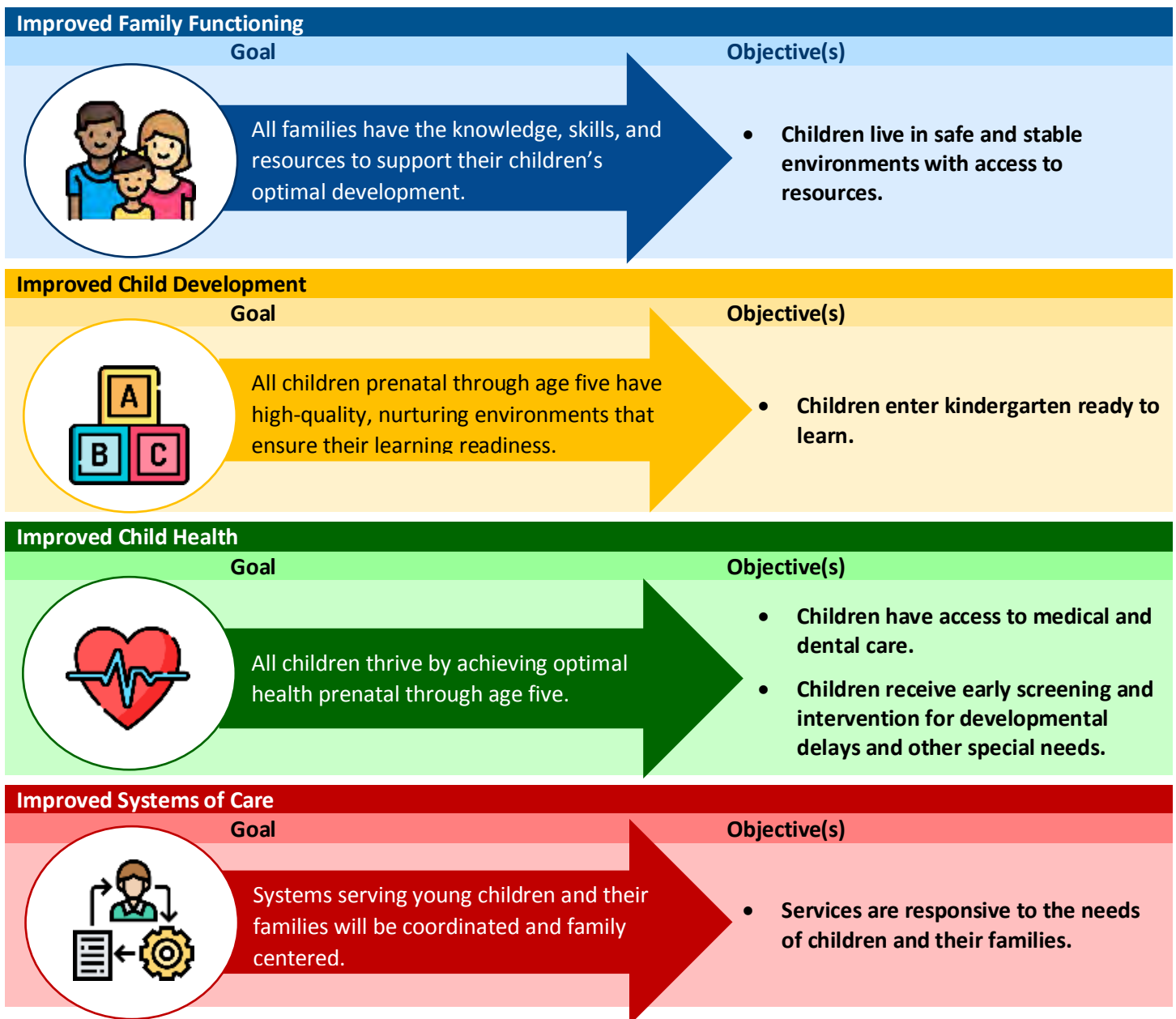


## FIRST 5 PLUMAS STRATEGIC PLAN 2020-2025

The Commission determined that a continuation of its legacy investment in home visiting services was a successful strategy in addressing the prevailing needs of families with young children in Plumas County. Research shows home visiting can be an effective method of delivering family support and child development services that lead to **improved child health and development** as well as **strengthened parenting skills**. It has also been an effective intervention in decreasing the incidence of child abuse and neglect, as well as the number of children in the social welfare, mental health, and juvenile corrections systems.

*High-quality home visiting programs can improve outcomes for children and families, particularly those that face added challenges such as teen or single parenthood, maternal depression and lack of social and financial supports.<sup>1</sup>*

As a result, the Commission adopted the following goals and objectives for its 2020-2025 Strategic Plan:



<sup>1</sup> Retrieved on December 31, 2019 from: <http://www.ncsl.org/research/human-services/home-visiting-improving-outcomes-for-children635399078.aspx>



The strategies the Commission will invest in to realize its goals and objectives include:

## Plumas County Public Health

### Family First Home Visiting Program

Plumas County Public Health Family First Home Visiting Program provides home visiting services to pregnant women and parents of young children. Nurses conduct home visits where topics include prenatal care, caring for an infant or toddler, and encouraging the emotional, physical, and cognitive development of young children.

## Roundhouse Council

### Home Visiting Program

Roundhouse Council offers home visiting services to Native American families with children from birth through five years of age. Case management, literacy supports, and child development activities are provided to families.

## Plumas Unified School District

### Early Intervention Home Visiting Program

The Early Intervention Teacher at Plumas Unified School District provides home visiting services to children age 0-3 who have been identified with a developmental delay. Services are customized according to families' needs.

## First 5 Plumas

### Early Childhood Development Home Visiting Program

The First 5 Plumas Family Services Coordinator provides home visiting services to families with children prenatal through age five. By developing a trusting relationship with the primary caregiver, the home visitor works to encourage healthy parenting practices and self-care habits.

The Commission has established a long-range financial plan to support these investments over the course of this strategic plan. The Commission will be drawing from its fund balance each year of the plan to support maintenance of current efforts.

Fiscal Allocations by Budget Category	Fiscal Year 2020-2021	Fiscal Year 2021-2022	Fiscal Year 2022-2023	Fiscal Year 2023-2024	Fiscal Year 2024-2025
<b>Administration Costs</b>	\$99,087	\$102,060	\$105,121	\$108,275	\$111,523
<b>Program Costs</b>	\$356,063	\$359,379	\$362,795	\$287,802	\$291,426
<b>Evaluation Costs</b>	\$40,231	\$40,231	\$40,433	\$40,641	\$40,856
<b>Total Annual Budget</b>	\$495,185	\$501,670	\$508,350	\$436,718	\$40,856
<b>Total Annual Revenue</b>	\$484,351	\$484,243	\$484,069	\$405,314	\$405,000
<b>Operational Surplus/Deficit</b>	(\$10,834)	(\$17,427)	(\$24,281)	(\$31,404)	(\$38,805)
<b>Fund Balance</b>	<b>\$573,083</b>	<b>\$555,656</b>	<b>\$531,375</b>	<b>\$499,971</b>	<b>\$461,166</b>

The Commission will regularly assess its progress towards achieving its goals and objectives, conducting an annual review and update if needed.

## BACKGROUND AND INTRODUCTION

First 5 Plumas Children and Families Commission was formed following the passage of California Proposition 10 (Prop 10). The Prop 10 initiative added a 50-cent-per-pack tax on cigarette sales to fund programs promoting early childhood development for children prenatal through age five and their families. First 5 Plumas operates on an annual budget of approximately \$400,000 made up primarily of Prop 10 funds. As a small county, First 5 Plumas is dependent on small county augmentation funds provided by First 5 California. It also draws down Medi-Cal Administrative Activities (MAA) funds. Combined, these funds are used to provide services and make system improvements supportive of young children and families. First 5 Plumas works closely with county agencies and community based partners, leveraging local resources to increase the value of its investments with the aim of supporting an effective network of prevention and early intervention supports for families with young children.

This strategic plan outlines the historical efforts and achievements of the Commission as well as the results of an assessment that compared the current needs of families with young children to legacy programs funded by the Commission. This information was used to determine the strategic direction for the Commission for 2020-2025 and is the basis for the plan contained herein.

## ORGANIZATIONAL FRAMEWORK

First 5 Plumas operates under policy direction of the First 5 Plumas County Children and Families Commission. The Commission is guided by its vision, mission, and guiding principles as provided below.

### Vision

Plumas County children will thrive in supportive, safe, nurturing, and loving environments. They enter school healthy and ready to learn, becoming productive, well-adjusted, and included members of society.

### Mission

First 5 Plumas will provide a comprehensive system of early childhood development services, on a countywide basis, to all children prenatal to age five. Through the integration of health care, quality child care, and parent education, children will be provided with the support necessary to ensure that they are healthy, resilient, well-adjusted, and ready to succeed when they enter kindergarten.

### Guiding Principles

**Fairness:** The Commission is dedicated to making fair and transparent decisions that are influenced by community input.

**Equity:** The Commission is committed to issues of equity and promote programs that are culturally competent, linguistically appropriate, and work to integrate service delivery.

**Respect:** The Commission values diversity of opinion and treats each other, our partners, consumers, and stakeholders with dignity and respect.

**High-Quality:** The Commission is steadfast in its efforts to fund high-quality services and will use evaluation as a means to promote accountability.

**Sustainability:** The Commission has pledged to leverage funds to maximize community resources with the intent to establish sustainable efforts.

**Focus:** The Commission understands that its role is to focus on policy level issues and decisions.

## STRATEGIC PLAN REQUIREMENTS

Proposition 10 requires all county commissions “adopt an adequate and complete County Strategic Plan for the support and improvement of early childhood development within the county. The strategic plan must include a description of the goals and objectives proposed to be attained, a description of the programs, services, and projects proposed to be provided, sponsored or facilitated; and a description of how measurable results of such programs, services, and projects will be determined by the County Commission using appropriate and reliable indicators.”

Activities sponsored with Proposition 10 funds are expected to focus specifically on children prenatal through age five and their families. Further, Proposition 10 has established four strategic results areas that each Commission should pursue:

### Improved Family Functioning

- Strong families are those who are able to provide for the physical, mental, and emotional development of their children, recognizing that young children are entirely dependent upon caregivers for survival and nurturing. Parents and caregivers provide the foundation for a child's ability to create successful relationships, solve problems and carry out responsibilities.

### Improved Child Development

- High-quality early care and education helps children to develop the skills they need for kindergarten and later school success. Considerable research over the last several decades has demonstrated long-term gains for children that participate in high-quality early care and education, especially children from disadvantaged households.

### Improved Child Health

- Children who are healthy in mind, body, and spirit grow with confidence in their ability to live a fulfilling, productive life. Healthy children have sufficient nutrition, health care, nurture and guidance, mental stimulation, and live in families and communities that value them.

### Improved Systems of Care

- Many parents and caregivers with young children have difficulty in accessing existing forms of assistance, much less being able to learn about and utilize new services that are introduced. As such, Commissions must promote integration, linkage, and coordination among programs, service providers, revenue resources, professionals, community organizations, and residents. Further, services must be available in a culturally competent manner, embracing the differences in cultures and languages within the county.

These four strategic result areas serve as the basis for each Commission strategic plan at both the county and the state level. As such and aligned with this framework, First 5 Plumas has established the 2020-2025 Strategic Plan in order to effectively guide the Commission in its efforts to improve the lives of children birth through five and their families in Plumas County.



## METHODS

In 2019, First 5 Plumas embarked upon a strategic planning process to explore the issues facing families with young children and to assess whether existing investments were addressing such issues. The goal of this process was the establishment of a new five-year strategic plan that would be used in the following ways:

- As a **communications tool**, to support key stakeholder understanding of the vision, mission, and goals of the organization.
- As a **management tool**, to maintain organizational focus and measure progress in meeting strategic goals and objectives.

To develop this strategic plan, a phased approach was used. The three phases of the strategic planning process took place between October 2019 through March 2020 and are described below.

### Phase I

#### PLUMAS COUNTY REPORT CARD:

The initial phase of the strategic planning process included an update to the Commission's County Report Card to understand the current issues facing families with young children. Areas of inquiry were identified through a survey that was issued to both Commissioners and funded grantees. Publicly available data was collected on the indicators that were identified as important to help inform the strategic planning process.

### Phase II

#### ESTABLISHING PRIORITIES:

The second phase of the strategic planning process involved convening the First 5 Commission to review the report card report. The issues most pressing to families with young children were identified and compared to legacy investments. As a result of this review and comparison, Commission priorities were established/confirmed.

### Phase III

#### STRATEGIC PLAN DEVELOPMENT:

The final phase of the strategic planning process involved confirmation of the goals, objectives and strategies for achievement as well as the outcomes to be achieved. It also included the development of a long-range financial plan. The strategic plan was available for public comment and adopted by the Commission on March 4, 2020.



## LEGACY INVESTMENTS

The Commission's primary strategy in realizing its vision and fulfilling its mission is through the support of home visiting services. Over the past decade, the Commission has funded four direct service grants that provide **home visiting services** to families (including foster parents) who have children prenatal through age five. All programs utilize the Strengthening Families™ framework to support and measure success.

Additional services and supports provided in coordination with and oftentimes integrated within the home visiting service delivery approach include:

- Early Intervention Services: Developmental screenings and services to support children exhibiting delayed development are provided.
- Parenting Resources: Parenting resources such as the Kit for New Parents and Daddy's Tool Bag are offered to parents.
- School Readiness Supports: Kindergarten round-up support and transitional planning for kindergarten entry are provided to families embarking upon kindergarten entry.

## ACHIEVEMENTS

First 5 Plumas has a number of achievements that it intends to leverage and build from in the implementation of future efforts. These include:

**Strong Outcomes for Families Served:** Year-over-year evaluation results indicate that First 5-funded home visiting programs continue to make a positive impact on families being served. Evaluation results show that:

- Families are stronger. Families report a substantial increase in each of the five protective factors after receiving home visiting services.
- Families are engaged. A high percentage of families participate in at least four home visiting services. This indicates that families value the services provided.
- Families are satisfied. Satisfaction surveys completed by First 5 program recipients indicate a high satisfaction with services and that programs are meeting the needs of families.

**Behavioral Health Service Expansion:** First 5 Plumas partnered with the County Behavioral Health - Mental Health Services Act to invest in expanded behavioral health care for families with young children. As a result, Plumas Rural Services has established a service wing that now bills Medi-Cal and is able to sustain efforts for the community's benefit.

**Dental Health Supports:** First 5 Plumas participated in a multi-county effort to support preventive dental care treatment for young children. As a result of these early efforts, the county Public Health Department hired a Registered Dental Assistant as a component of its Maternal Child and Adolescent Health program. It continues to provide sealants and supports for families, including case management for those requiring significant dental care treatment.

**Strong Partnerships with Mission-Aligned Community Organizations:** First 5 Plumas has built a strong foundation of community partnerships with entities such as the Plumas County Office of Education, Plumas Rural Services, Far Northern Regional Services, the County Public Health Department, and the County Behavioral Health Department. These partnerships allow First 5 to leverage efforts and work through trusted entities to ensure families receive the services they need.

**Systems Change Activities:** First 5 Plumas has invested in a number of systems change efforts in the county including:

- A standardized developmental screening schedule across programs based on best practices
- Development of materials and tools to further program outreach efforts and improve case management
- Utilization of the ZERO TO THREE Comprehensive Integrated Childhood Systems Framework
- Research and planning to implement a Help Me Grow Model of Care in Plumas County

## ASSESSMENT OF FAMILY NEEDS AND COMMISSION INVESTMENTS

As a component of the strategic planning process, the Commission developed a report card of indicators related to children and families in Plumas County. The First 5 Plumas – County Report Card 2019 provided insight into the state of children and their families in Plumas County. This companion document was used as the basis to understand whether the Commission's legacy investments were meeting the current needs of families with young children.

### SITUATION FACING FAMILIES WITH YOUNG CHILDREN IN PLUMAS COUNTY

The First 5 Plumas – County Report Card 2019 contains data on the following indicators to demonstrate the situation facing families with young children in Plumas County:

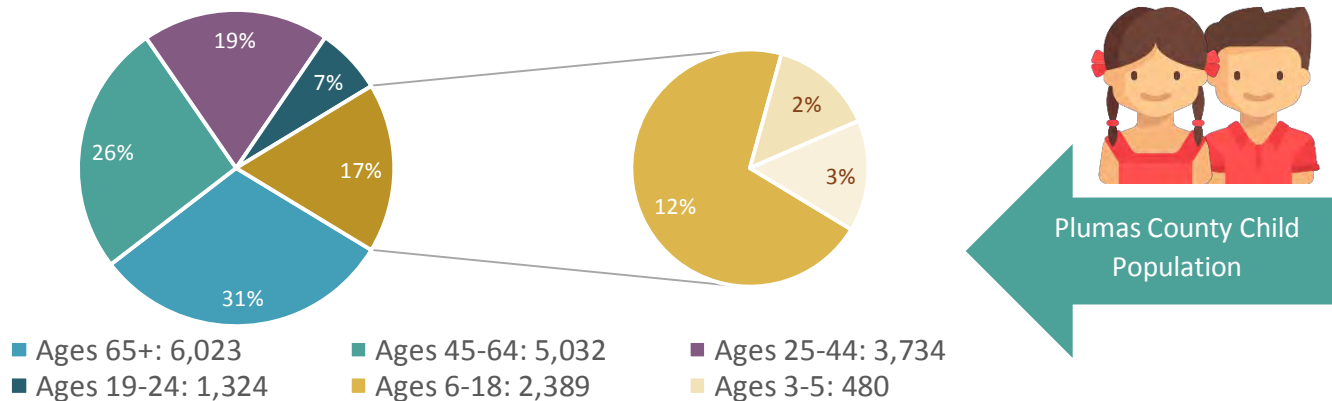
<b>Family Level Indicators</b>	<ul style="list-style-type: none"> <li>Insured/Uninsured Rates</li> <li>Health Care Patient to Provider Ratio</li> <li>Dentist Patient to Provider Ratio</li> <li>Mental Health Patient to Provider Ratio</li> </ul>	<ul style="list-style-type: none"> <li>Substance Use/Abuse Rates</li> <li>Smoking Rates</li> <li>Violent Crime Rates</li> </ul>
<b>Pre and Postnatal Level Indicators</b>	<ul style="list-style-type: none"> <li>Teen Birth Rates</li> <li>Rate and Adequacy of Prenatal Care</li> <li>Low Birth Weight Rates</li> <li>Breastfeeding Occurrence and Duration</li> </ul>	<ul style="list-style-type: none"> <li>Postpartum Depression Rates</li> <li>Infant Mortality</li> <li>Immunization Rates</li> </ul>
<b>Child Level Indicators</b>	<ul style="list-style-type: none"> <li>Adverse Childhood Experiences (ACEs)</li> <li>Early Childhood Education Need/Capacity</li> <li>Child Abuse Data</li> </ul>	<ul style="list-style-type: none"> <li>Children Living in Single-Parent Homes</li> <li>Children Exposed to Mental Health Illness</li> <li>Children with Special Needs</li> </ul>

In addition, countywide contextual information was collected. A highlight of major findings is provided below.

### COUNTYWIDE CONTEXT

#### DEMOGRAPHIC PROFILE OF PLUMAS COUNTY POPULATION

2019 population projections indicate Plumas County has a total of 19,496 residents.<sup>2</sup> Of the total population, individuals 65 and older make up the largest percentage of the population at 31%, with the median age for the county being 52.<sup>3</sup> There are a total of 994 children between the ages of zero and five, who make up 5% of the total population.



The majority of the population is White (16,311 or 84%), followed by Hispanic/Latino (1,757 or 9%).

<sup>2</sup> U.S. Census Bureau Population Estimates. August, 2019. <https://www.census.gov/quickfacts/fact/table/plumascountycalifornia>

<sup>3</sup> California Department of Finance. P-2 County Population Projections by Ethnicity, Age, 2010-2060. <http://www.dof.ca.gov/Forecasting/Demographics/Projections/>

## IDENTIFIED NEEDS OF FAMILIES WITH YOUNG CHILDREN

Key trends indicated by the data collected are summarized below, both for the County and specific to the target population of families with young children.

### ISSUES IMPACTING ALL RESIDENTS

- **Economic Security:** Residents in Plumas County tend to fare worse than the average Californian related to issues of economic security. Plumas County residents have lower median incomes and higher unemployment rates than the average Californian. That said, both of these circumstances have improved over time and are not significant issues for most Plumas County residents.

### ISSUES IMPACTING FAMILIES WITH YOUNG CHILDREN

- **Mental Health:** Families in Plumas County are experiencing higher rates of mental health issues than the average Californian. The suicide rate in Plumas County is substantially higher than that of California, and mental health risk among children and teens in the county is on the rise. With only 53 mental health providers in the County, the patient to provider ratio can prohibit effective and timely treatment for residents.
- **Substance Abuse:** Opioid abuse is affecting families in Plumas County substantially. The opioid overdose rates in some areas of the county are up to five times higher than the rate in California. With no residential treatment for individuals with addiction in Plumas County, families are left with little structured support to overcome opioid addiction. The high rates of substance abuse in Plumas County are of special concern for young children, as women who are pregnant and using opioids can negatively impact their child's health and development indefinitely. With nearly 2,000 infants in California born with a drug dependency, substance abuse should be of primary concern for counties with high rates of opioid use like Plumas County.

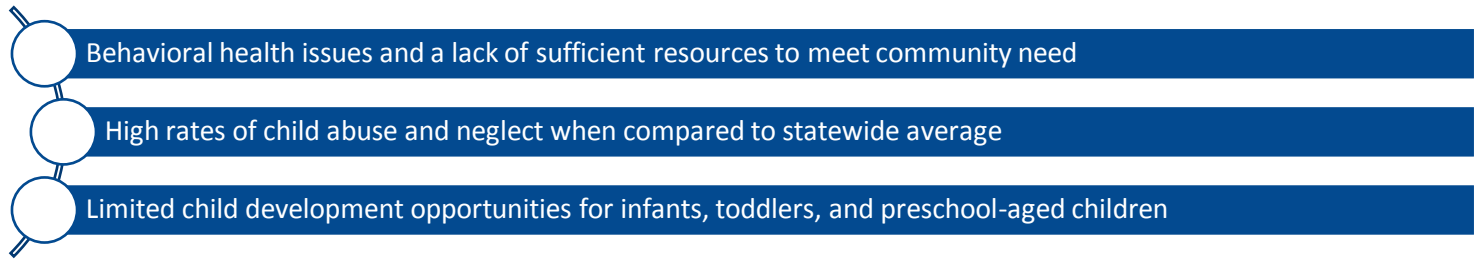
### ISSUES IMPACTING CHILDREN AGE ZERO THROUGH FIVE

- **Prenatal Care and Low Birth Weight:** Accessing early and adequate prenatal care can reduce the risk of serious pregnancy complications. Only 73.5% of pregnant women in Plumas County received prenatal care in their first trimester (compared to 78.8% Statewide).<sup>4</sup> Additionally, Plumas County has a higher rate of low birth weight babies than the California average.
- **Adverse Childhood Experiences (ACEs):** Children who experience adversity in their childhood can suffer numerous negative health outcomes later in life. While data on ACEs specific to Plumas County is not available, combined data for Plumas and its surrounding counties shows that children are experiencing higher numbers of ACEs compared to the California average. Additionally, Plumas County has a child abuse/neglect rate that is more than double that of the statewide average (22/1,000 children compared to 8/1,000 children). That being said, home visiting service providers in Plumas County are working to combat these high ACEs levels by using the Protective Factors framework to support family resiliency and reduce child abuse.
- **Early Childhood Education and Child Care:** High-quality early childhood education has been shown to have lasting positive outcomes for children. Plumas County does not have sufficient resources to provide early childhood education to its infants, toddlers, or preschool aged children. Data demonstrates that the county as a whole only has the capacity to serve approximately 50% of its children with early care and education supports. This can impact a family's ability to support their child's optimal development.

<sup>4</sup> Plumas County Maternal Child and Adolescent Health Community Profile 2017-18, retrieved from <https://www.cdph.ca.gov/Programs/CFH/DMCAH/LocalMCAH/CDPH%20Document%20Library/Community-Profile-Plumas.pdf>

## COMMISSION INVESTMENTS IN MEETING IDENTIFIED NEEDS

Publicly available data indicates that the issues most impacting families and young children in Plumas County include:

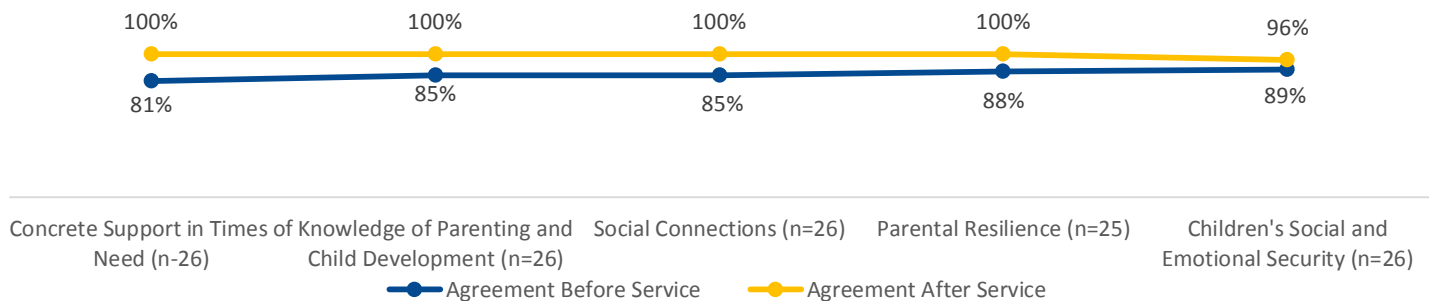


Home Visiting, as the legacy investment strategy of the Commission, can continue to be a successful strategy in addressing these needs. Research shows home visiting can be an effective method of delivering family support and child development services that lead to **improved child health and development** as well as **strengthened parenting skills**. It has also been an effective intervention in decreasing the incidence of child abuse and neglect, as well as the number of children in the social welfare, mental health, and juvenile corrections systems.

*High-quality home visiting programs can improve outcomes for children and families, particularly those that face added challenges such as teen or single parenthood, maternal depression and lack of social and financial supports.<sup>5</sup>*

Commission sponsored home visiting services have yielded year-over-year positive outcomes for families served. In the 2018-2019 grant term, surveys collected by First 5 home visitors demonstrated an increase in all protective factors amongst families receiving home visiting services, most notably in concrete support in times of need.

### Protective Factors Before and After Receipt of Home Visiting Services



Lastly, when asked what kind of services Commissioners would prioritize to address perceived community need, the following were ranked the highest (in order of priority):

1. Family Support Services/Home Visiting
2. Behavioral Health/Social Emotional Supports
3. Services to Support Children with Special Needs
4. Developmental Screenings
5. Parent and Child Interactive Activities

All of these services, with the exception of direct behavioral health care, are provided within the constructs of home visiting programs sponsored by the Commission. Additionally, home visiting services offer families the connection they need to access other community based services through information and referral.

<sup>5</sup> Retrieved on December 31, 2019 from: <http://www.ncsl.org/research/human-services/home-visiting-improving-outcomes-for-children635399078.aspx>



## PLAN FOR THE FUTURE

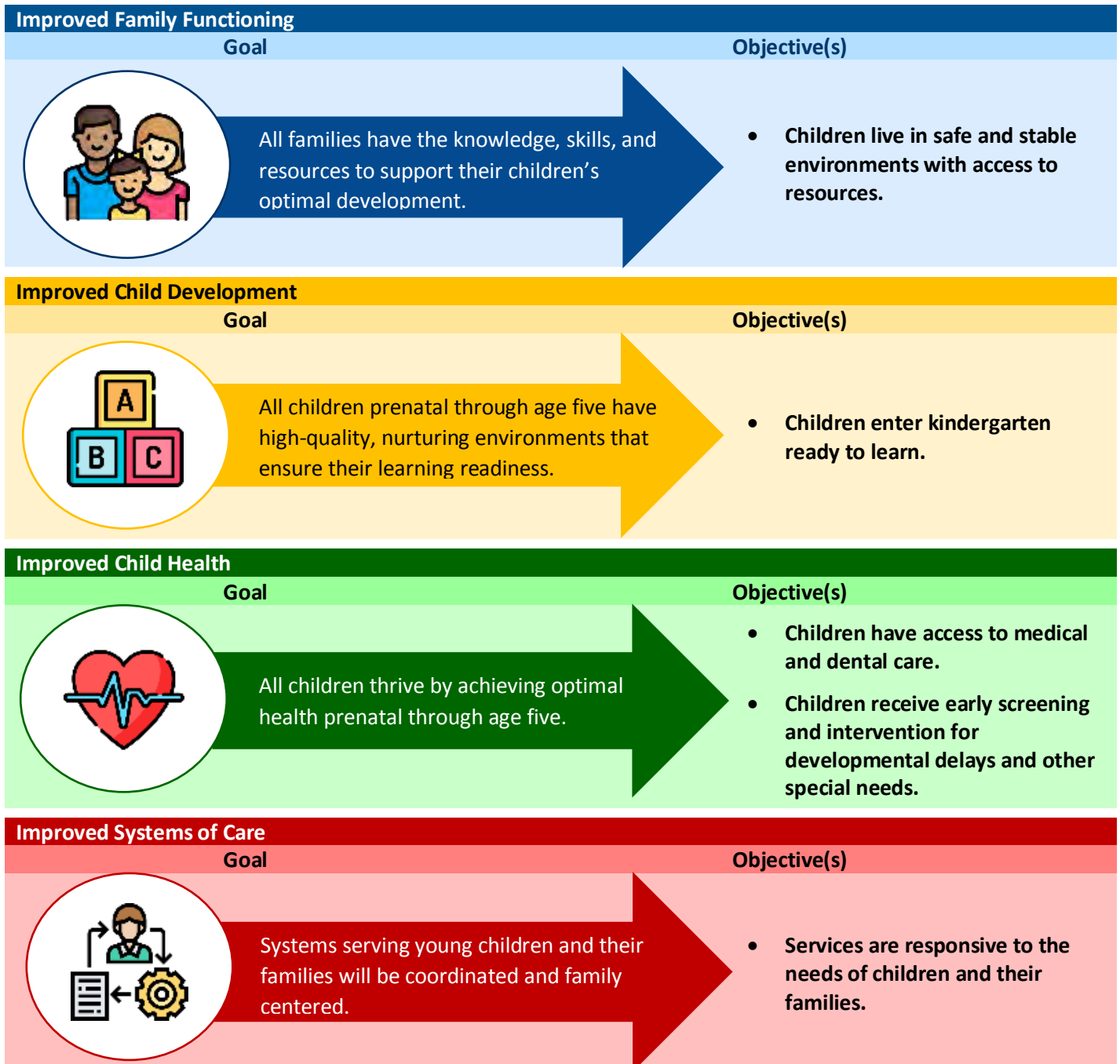
### 2020-2025 PRIORITIES

The 2020-2025 Strategic Plan will be implemented with the following priority framework:

- Commission will fund direct services to children prenatal through age five and their families, county-wide.
- Emphasis on the implementation of best practices where possible.

### GOALS, OBJECTIVES AND STRATEGIES FOR ACHIEVEMENT

The 2020-2025 Strategic Plan will be implemented to achieve an assortment of objectives. Objectives will be prioritized based the priorities established above, funding available, and current conditions facing Plumas County families.



First 5 Plumas will invest in the following home visiting programs to achieve its strategic goals and objectives:



## Plumas County Public Health

### Family First Home Visiting Program

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Plumas County Public Health Family First Home Visiting Program provides home visiting services to pregnant women and parents of young children. Nurses conduct home visits where topics include prenatal care, caring for an infant or toddler, and encouraging the emotional, physical, and cognitive development of young children.



## Roundhouse Council

### Home Visiting Program

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Roundhouse Council offers home visiting services to Native American families with children from birth through five years of age. Case management, literacy supports, and child development activities are provided to families.



## Plumas Unified School District

### Early Intervention Home Visiting Program

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The Early Intervention Teacher at Plumas Unified School District provides home visiting services to children age 0-3 who have been identified with a developmental delay. Services are customized according to families' needs.



## First 5 Plumas

### Early Childhood Development Home Visiting Program

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The First 5 Plumas Family Services Coordinator provides home visiting services to families with children prenatal through age five. By developing a trusting relationship with the primary caregiver, the home visitor works to encourage healthy parenting practices and self-care habits.



## OUTCOMES TO BE ACHIEVED

Goal: All families have the knowledge, skills, and resources to support their children's optimal development.				
Objective	Strategy	Performance Indicators	Tables and Charts	Outcome Indicators
Children live in safe and stable environments with access to resources.	Provision of family strengthening activities through home visiting services.	Number of families participating in family strengthening activities through home visiting services.	Home visiting participant demographics: age, ethnicity, geographic location	Increased accessibility of services /or activities to parents of/and children prenatal through age five.
			Number/type of services provided to families during home visits.	
		Number of families receiving home visiting services that are engaged (participate at sufficient rate to benefit from service intervention)	Number/percent of families who receive at least four home visiting services.	
			Number of home visits that occurred, and average number of home visits received by families per home visiting program.	
		Number of families being linked to community resources.	Number/percent of families who receive a referral to a community service provider.	
			Number/type of referrals provided to families during home visits.	

Goal: All children birth through age 5 have high-quality, nurturing environments that ensure their learning readiness.				
Objective	Strategy	Performance Indicators	Tables and Charts	Outcome Indicators
Children enter kindergarten ready to learn.	Provision of child development activities, coaching, and supports through home visiting services.	Number/Percent of parents participating in home visiting services that maintain habits that support their child's development.	Number/percent of parents who report that they or another family member reads with their child(ren) each day.	Increased school readiness of children prenatal through age five.
			Number/percent of parents who report that they or another family member practice counting or doing activities that involve numbers with their child(ren) each day.	
			Number/percent of parents who report that they or another family member plays with their child(ren) each day.	
			Number/percent of parents report that they or another family member provides their child(ren) with opportunities for physical activities each day.	
			Number/percent of parents who report that they or another family member follow regular routines with their child(ren) each day.	



Goal: All children thrive by achieving optimal health prenatal through age 5.				
Objective	Strategy	Performance Indicators	Tables and Charts	Outcome Indicators
Children have access to medical and dental care.	Provision of health care and dental care information, application assistance, support, and advocacy through home visiting services.	Number of children with health insurance.	Pre/post number/percent of children with health insurance.	Increased access to medical care.
		Number of children with a medical home.	Pre/post number/percent of children with medical home.	
		Number of children who are up-to-date on well-child visits.*	Pre/post number/percent of children who are up-to-date on well-child visits.	
		Number of children with dental insurance.	Pre/post number/percent of children with dental insurance.	Increased access to dental care.
		Number of children with a dental home.	Pre/post number/percent of children with dental home.	
		Number of children who are up-to-date on dental visits.*	Pre/post number/percent of children who are up-to-date on dental visits.	
Children receive early screening and intervention for developmental delays and other special needs.	Provision of developmental screenings through home visiting services.	Number of children who received developmental screenings.	Number/percent of children who received the Ages and Stages Questionnaire (ASQ) screening by program.	Increased number of children screened for a developmental delay prior to entering kindergarten.
			Number of children screened with the ASQ who scored above, at, and below cutoff in each developmental domain (5).	
		Number of children who received social emotional developmental screenings.	Number/Percent of children who received the Ages and Stages Questionnaire Social Emotional (ASQ:SE) screening by program.	
			Number of children screened with the ASQ:SE who scored above, at, and below cutoff in each developmental domain (5).	

Goal: Systems serving young children and their families will be coordinated and family centered.				
Objective	Strategy	Performance Indicators	Tables and Charts	Outcome Indicators
Services are responsive to the needs of children and their families.	Provision of home visiting services in a manner that meets the needs of families with children prenatal through age five.	Number of parents reporting satisfaction with the content, quality, and family-centeredness of services.	Number/percent of parents that agreed or strongly agreed that they received the assistance that they needed.	Increased quality of care provided to families of children prenatal through age five.
			Number/percent of parents that agreed or strongly agreed that their impression and interaction with staff was positive.	
			Number/percent of parents that agreed or strongly agreed that their overall satisfaction with services was very good.	

\* Evaluation tools do not answer these questions directly. There is an assumption regarding the link between when the most recent medical/dental care was received and up-to-date medical/dental care.





## LONG-RANGE FINANCIAL PLAN

First 5 Plumas has completed a long-range financial plan (LRFP) as a means to determine funding allocations to support the Strategic Plan. This plan will be the guideline for future funding of internal operations, programming, and services. The plan covers the same five-year period covered by the strategic plan (2020-2025).

The following principles provide the framework for implementation of this financial plan:

- The financial plan will be reviewed annually and updated, if necessary, to reflect actual revenue and expenditures at the end of each fiscal year. It may also be changed based on changes to the strategic plan.
- The financial plan will be used as the basis for the annual budget process.
- The assumptions used in development of this plan will be consistently reviewed by staff and shared with the Commission to ensure there have been no changes to invalidate or change their effectiveness.
- Changes to this financial plan must be approved by the Commission.

## FINANCIAL PLAN GOALS AND OBJECTIVES

The primary goal of this financial plan is long term sustainability. Aligned with this overarching goal are the following commitments:

- Prop 10 funds will support the long-term availability of effective programs for families with children prenatal through age five.
- Prop 10 funds will be used to leverage additional funding to support community programs.
- The Commission will annually allocate the majority of its revenue stream to support community programs.
- The Commission will fund systems change efforts to improve outcomes for families with children prenatal through age five.

These commitments will be upheld through implementation of the following objectives:

- The Commission will support ongoing capacity building needs for program investments.
- The Commission will conduct regular evaluation efforts to ensure program effectiveness.
- The Commission will leverage funding to support the Commission and its funded programs.
- The Commission will establish a six-month reserve for program continuation or contingencies. This six-month reserve is built on the base funding allocation of \$350,000 (consistent with the current SPCFA).
- The Commission will allocate administrative costs that fit within a range of 16-25% of its annual budget.



## FISCAL ASSUMPTIONS

The heart of the financial plan is a set of assumptions about what is projected to occur in the future. These assumptions shed light on important financial issues, such as where the greatest opportunities exist to improve the future financial capacity for investing in the well-being of young children as well as where the greatest risks lie for future revenue reductions and expense increases. They also serve as the foundation for the five-year forecast of revenues and expenses contained in this plan.

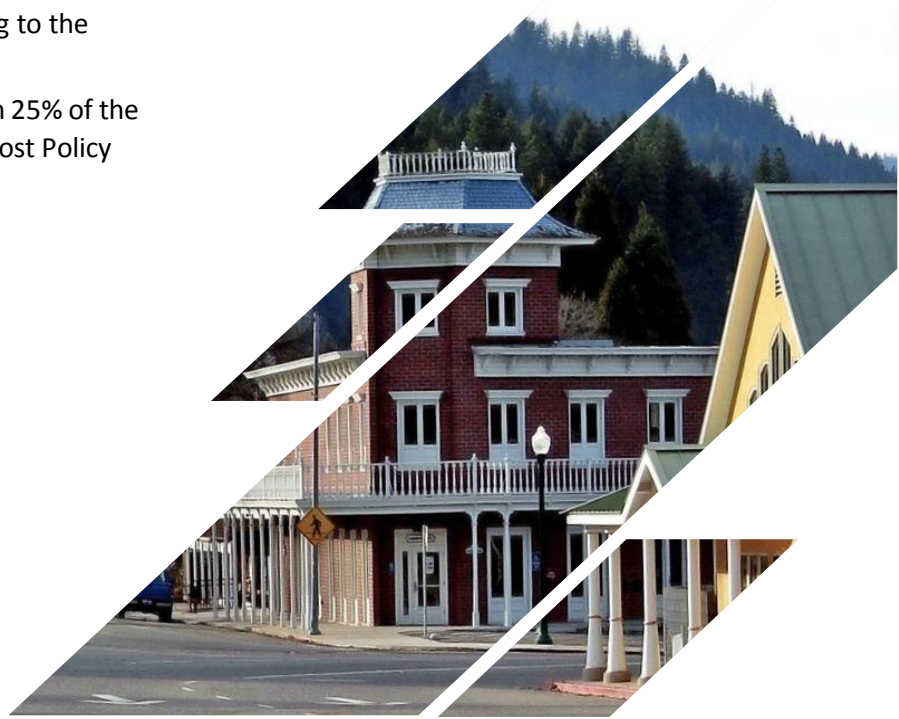
Assumptions affecting the projected financial future of First 5 activities in Plumas County are outlined below.

## REVENUE ASSUMPTIONS

- Prop 10 revenue projections are an estimate. Typically, First 5 California will provide revenue projections, but these projections were not available at the time of strategic plan completion. The LRFP should be updated to reflect actual projections every year that the plan is reviewed and updated.
- First 5 California Small Population County Funding Augmentation (SPCFA) is authorized and committed by First 5 California through June 30, 2021. This plan is built on the assumption that SPCFA funds will be reauthorized beyond June 30, 2021 at the same level (resulting in a total county allocation of \$350,000 annually). If the SPCFA is not re-authorized or is reduced, it will trigger an automatic review and update to this LRFP.
- Medi-Cal Administrative Activities (MAA) funding is expected to generate \$50,000 annually for every year of the strategic plan period. The decrease in funding is to account for payment that is restricted to current efforts. Funding received in FY 2018-2019 and in FY 2019-2020 included back-pay from previous performance.
- IMPACT Coordination funding is based on the standard award included in the 2020-2023 RFP, which totals \$235,537. No funding for IMPACT is planned beyond FY 2022-2023.
- Interest earnings are based on a 1% return on the previous year's fund balance.
- Surplus budget funds will rollover into the beginning fund balance of the next year.

## EXPENSE ASSUMPTIONS

- 3% personnel costs increase annually, to include salary adjustments and increased taxes and benefits.
- 3% increases annually to administrative and program operations that are not associated with an external contractor.
- 8% of the annual budget is designated for administrative support provided by the County of Plumas.
- IMPACT Implementation equals the total award, as First 5 Plumas is intended to pass through all funding to the implementing agency.
- Administrative expenses will be no more than 25% of the total annual budget, per the Administrative Cost Policy established in FY 05-06.



## FIVE YEAR FISCAL PLAN

First 5 Plumas Five Year Budget Projections, FY 2020-2021 through FY 2024-2025.

	2018-2019 Actuals	2019/2020 Adopted	2020/21 Proposed	2021/22 Proposed	2022/23 Proposed	2023/24 Proposed	2024/2025 Proposed
Beginning Fund Balance	519,242	670,142	583,917	573,083	555,656	531,375	499,971
<b>Revenue</b>							
Prop 10 Projected Revenue	85,770	95,000	95,000	95,000	95,000	95,000	95,000
Small County Augmentation	247,011	255,000	255,000	255,000	255,000	255,000	255,000
IMPACT Coordination	110,000	27,174	78,512	78,512	78,512		
Other First 5 CA Funds	10,605						
MAA	261,726	50,000	50,000	50,000	50,000	50,000	50,000
Other Funds (Adjustment)	1,694						
Interest	11,908	4,000	5,839	5,731	5,557	5,314	5,000
<b>Total Revenue</b>	<b>728,714</b>	<b>431,174</b>	<b>484,351</b>	<b>484,243</b>	<b>484,069</b>	<b>405,314</b>	<b>405,000</b>
<b>Expenditures</b>							
<b>Admin</b>							
Administrative Services and Supplies	36,343	40,600	41,818	43,073	44,365	45,696	47,067
Administrative Overhead	30,343	37,845	38,980	40,150	41,354	42,595	43,873
Staff Administrative Support	17,756	17,756	18,289	18,837	19,402	19,985	20,584
<b>Subtotal - Administration Costs</b>	<b>84,442</b>	<b>96,201</b>	<b>99,087</b>	<b>102,060</b>	<b>105,121</b>	<b>108,275</b>	<b>111,523</b>
<b>Program</b>							
Improved Family Functioning: PCPHA Family First	100,000	100,000	100,000	100,000	100,000	100,000	100,000
Improved Family Functioning: Roundhouse Council	27,481	30,000	30,000	30,000	30,000	30,000	30,000
Improved Family Functioning: Early Childhood Dev. Spec.	25,000	13,000					
Improved Child Development: IMPACT Implementation	110,000	82,503	78,512	78,512	78,512	-	-
Improved Child Development: Kindergarten Round-Up	7,000	7,000	7,000	7,000	7,000	7,000	7,000
Improved Child Development: Provider Supply Stipends	15,125						
Improved Health: PUSD - Early Intervention	20,000	20,000	20,000	20,000	20,000	20,000	20,000
Improved Systems of Care: Misc Community Investments	10,000	20,500	10,000	10,000	10,000	10,000	10,000
Program Overhead	4,000	4,000	4,120	4,244	4,371	4,502	4,637
Staff Program Support	69,350	99,350	106,431	109,623	112,912	116,299	119,788
Other	66,222	99,350	106,431	109,623	112,912	116,299	119,788
<b>Subtotal - Program Costs</b>	<b>454,178</b>	<b>376,353</b>	<b>356,063</b>	<b>359,379</b>	<b>362,795</b>	<b>287,802</b>	<b>291,426</b>
<b>Evaluation</b>							
Contracted Evaluator	23,602	30,000	25,000	25,000	25,000	25,000	25,000
Data Management	8,500	8,500	8,500	8,500	8,500	8,500	8,500
Staff Evaluation Support	7,092	6,345	6,535	6,731	6,933	7,141	7,356
<b>Subtotal - Evaluation Costs</b>	<b>39,194</b>	<b>44,845</b>	<b>40,035</b>	<b>40,231</b>	<b>40,433</b>	<b>40,641</b>	<b>40,856</b>
<b>Total Expenditures</b>	<b>577,814</b>	<b>517,399</b>	<b>495,185</b>	<b>501,670</b>	<b>508,350</b>	<b>436,718</b>	<b>443,804</b>
<b>Fund Balance</b>							
<b>Net Increase(Decrease) to Fund Balance</b>	<b>150,900</b>	<b>(86,225)</b>	<b>(10,834)</b>	<b>(17,427)</b>	<b>(24,281)</b>	<b>(31,404)</b>	<b>(38,805)</b>
<b>Ending Fund Balance</b>	<b>670,142</b>	<b>583,917</b>	<b>573,083</b>	<b>555,656</b>	<b>531,375</b>	<b>499,971</b>	<b>461,166</b>

## FISCAL MANAGEMENT

Through a formal Memorandum of Understanding (MOU) with the County of Plumas, the Plumas County Public Health Agency (PCPHA) provides the Commission's fiscal administration. The PCPHA and Commission staff will manage assets consistent with fiscal accounting control policies and procedures of the Plumas County Auditor's Office.

Commission staff works with the PCPHA to track and monitor revenue and expenses and to develop meaningful report to the Commission. Quarterly and annual financial reports to the Commission assist members and staff in evaluating the effective use of Proposition 10 dollars. Quarterly and annual financial reports document Commission revenue, expenses, grant funds expended, GASB 54 reports on assigned, committed, and unassigned fund balances, and as applicable, reserve fund interest earnings.

## ADMINISTRATIVE COSTS

The First 5 Plumas County Children and Families Commission shall use the most recent definition in the First 5 Financial Management Guide to define administrative functions. The definition, at the time that this plan was adopted, states:

*Administrative costs are defined as costs incurred in support of the general management and administration of a First 5 Commission for a common or joint purpose that benefits more than one cost objective (other than evaluation activities) and/or those costs not readily assignable to a specifically benefited cost objective.*

The Commission shall adhere to this definition in its budgeting, accounting and financial reporting processes. Where there is a question of interpretation of how specific activities shall be coded, the definition of administrative costs benefiting more than one cost objective, or not being readily assignable to one cost objective will serve as the determining definition.

Administrative costs may include commission support (e.g., meetings, recruitment, committee work), fiscal management, state/local government monitoring/participation, public relations, general administration (e.g., office support, staff management), management staff, support staff salary and benefits, contract management, performance monitoring, staff training and travel costs, and other direct/indirect costs necessary to support operations and facilitate the goals and objectives of the Commission.

The Administrative Cost Limit may be adjusted at the discretion of the Commission for special costs (e.g., state initiative planning, capital asset purchases, etc.) planned for within the annual budget process.

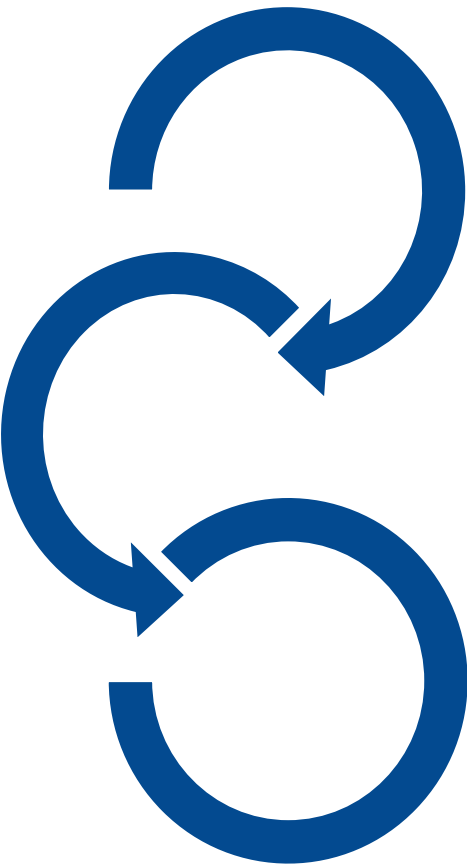
### **Administrative Cost Monitoring and Reporting:**

The Plumas County Public Health Agency and the Commission's Executive Director, through a Memorandum of Understanding with the Commission, will be responsible for establishing, within the accounting and reporting system a methodology for tracking and reporting administrative, program, and evaluation costs, and maintaining auditable records to ensure compliance with the administrative cost limit policy.

The Executive Director shall be responsible for presenting a breakdown of administrative, program, and evaluation costs by line item and as a percentage of the operating budget to the Commission on an annual basis. This information will ensure compliance with the administrative cost limit policy and will also be used to help guide future budgeting decisions. This information shall also be reported, on an annual basis, to the First 5 California Commission in the annual financial report, which is adopted by the Commission at a public hearing.

## EVALUATING AND UPDATING THE PLAN

This plan will be used as a management tool, with annual reviews and updates as mandated by Prop 10 statute.



### ANNUAL MID-YEAR REVIEW

A mid-year evaluation report will be established to provide a snapshot of commission investment strategies at mid-year. The Commission, staff, and funded partner agencies will use the information to make adjustments necessary to achieve the objectives of the plan contained herein.

### ANNUAL REVIEW

A report that provides detailed analysis of Commission investments and outcome achievement will be established at year-end and shared with the Commission, community members, grantees, and partner agencies. The report will help to inform a review of the Commission strategic plan and any identified changes needed to adjust to changing conditions and priorities.

### ANNUAL UPDATES

The Commission will update the strategic plan as mandated by the Prop10 statute:

- Strategic plans are to be reviewed annually and revised as necessary and appropriate. (CA Health and Safety Code Section 130140(a)(1)(C)(iii))
- When the plan is amended, a public hearing must be held and a copy must be sent to the state. (CA Health and Safety Code Section 130140(a)(1)(E and F)).

