



**Program and Grant Awards
Committee Meeting
Friday, August 23, 2024**

IN-PERSON
First 5 Madera County
525 East Yosemite Avenue
Madera, CA 93638

REASONABLE ACCOMMODATIONS FOR ANY INDIVIDUAL WITH A DISABILITY. Pursuant to the Rehabilitation Act of 1973 and the Americans with Disability Act of 1990, any meeting or function of the Madera County Children and Families Commission may request assistance by contacting the Madera County Children and Families Commission – telephone 559-661-5155.

1.0	OPENING REMARKS 1.1 Call to Order 1.2 Roll Call	Deborah Martinez, Chair
2.0	POTENTIAL CONFLICTS OF INTEREST Any Commission Member who has a potential conflict of interest may now identify the item and recuse themselves from discussing and voting on the matter.	Deborah Martinez, Chair
3.0 ACTION pg.3	CONSENT AGENDA 3.1 Approval of the August 23, 2024, PGA Committee Agenda 3.2 Approval of June 28, 2024, PGA Committee minutes	Deborah Martinez, Chair
4.0	PUBLIC COMMENT This time is offered for the public wishing to address the Committee on matters not listed on the agenda. Committee members listen but may not discuss non-agenda matters.	Deborah Martinez, Chair
5.0 ACTION pg.6	AGREEMENT RENEWAL- DATA MANAGEMENT SERVICES The Committee will review a request for agreement renewal for data management service with Persimmony International Inc.	J. Monica Ramirez, ED Diane Sandoval, Staff
6.0 INFORMATION pg.11	2023-2024 FUNDED PROGRAM YEAR-END SUMMARY The Committee will review overall funded program performance, financial information and key performance indicators.	J. Monica Ramirez, ED Desty Gonzalez, Staff
7.0 ACTION pg.20	CENTRAL VALLEY HELP ME GROW The Committee will receive a presentation on Help Me Grow (HMG) an early childhood system-building model for Central Valley implementation.	J. Monica Ramirez, ED
8.0	STAFF UPDATES	J. Monica Ramirez, ED
9.0	ANNOUNCEMENTS	Deborah Martinez, Chair
10.0	NEXT MEETING September 27, 2024	Deborah Martinez, Chair
11.0	ADJOURNMENT	Deborah Martinez, Chair

First 5 distributes monthly agendas electronically. Please forward your email address to Diane Sandoval at dsandoval@first5madera.org to be added to the list.



Program and Grant Awards (PGA) Meeting

Friday, June 28, 2024

9:00 am – 11:00 am.

IN-PERSON

First 5 Madera County
525 E. Yosemite Ave
Madera, CA 93638

MINUTES

REASONABLE ACCOMMODATIONS FOR ANY INDIVIDUAL WITH A DISABILITY: Pursuant to the Rehabilitation Act of 1973 and the Americans with Disability Act of 1990, any meeting or function of the First 5 Madera County – Program and Grant Awards Committee - may request assistance by contacting First 5 Madera County, 525 E. Yosemite Ave. Madera, CA 93638, telephone 559-661-5155.

Present:	Deborah Martinez, Chair Karen V. Wynn, Ph.D., Vice Chair Diana Saenz	Director of the Department of Social Services Community Representative – Eastern Madera County Community Representative-Madera County
Absent:		
Staff:	J. Monica Ramirez Desty Gonzalez	Executive Director Early Learning Program Specialist
Public:		

1.0 OPENING REMARKS

1.1 Call to Order – K. Wynn, PGA Vice-Chair called meeting to order at 9:00 a.m.

1.2 Roll Call

Present: D. Saenz, K. Wynn, D. Martinez

Absent:

2.0 POTENTIAL CONFLICTS OF INTEREST

None

3.0 CONSENT AGENDA

3.1 Motion to approve June 28, 2024, PGA Committee Agenda as presented Motion to approve D. Saenz, second by K. Wynn

3.2 Motion to approve May 24, 2024, PGA Committee Minutes Motion to approve D. Saenz, second by K. Wynn.

Ayes: D. Saenz, K. Wynn

Nays: None

Abstain: None

Recused: None

Absent: None

4.0 PUBLIC COMMENT

There were no public comments.

5.0 REQUEST FOR QUOTES FOR EVALUATION SERVICES

M. Ramirez Shares action item 5.0 was previously approved. However, staff were bringing it back to ensure requested revisions are an accurate account of the PGA requests. Revisions include evaluation strategy, diverse and primary investments to be updated. Additionally, staff is working with Hamai Consulting to design an evaluation framework with clear goals and outcomes that follow and align with the 2024-2029 Strategic Plan.

D. Martinez shares having heard from others First 5 reporting requirements are not clear on what is expected, and this issue should be prioritized.

M. Ramirez shares staff continues to work with Hamai and are planning to be clear from the beginning with the creation of the RFP/RFQ, expectation, data reporting, and evaluation.

D. Saenz mentions on pg. 9 that there is a grammatical error.

No public comment

Motion to approve action item with the grammatical error fixed D. Saenz, Second by K. Wynn, item approved.

6.0 CENTRAL VALLEY HELP ME GROW

M. Ramirez shares information on the Central Valley Help Me Grow (CVHMG). This is a funding allocation request that does not exceed a \$60,000 investment for three years. The Help Me Grow (HMG) National program is a system that coordinates and integrates players to help children 0-12, however, CVHM-Madera will focus on 0-5 population. Overall funding from First 5 Madera County (F5MC) is roughly 2% of the program resulting in \$60,000 for three years, which will help establish the program in the Central Valley. CVHMG will help develop and enhance the coordination of services that exist for early intervention needs.

D. Martinez, K. Wynn, and D. Saenz enter in a discussion related to CVHMG and other local interdisciplinary teams focusing on development, screenings, referrals, and care that already exists and how CVHMG will support these programs. How is capacity growing to address concerns identified through screenings or surveys.

M. Ramirez shares a number of children need services, and F5MC conducts screening and surveys, but how can F5MC further support with limited capacity. Other, First 5's are accepting Medi-Cal for screenings to offset cost online resources or activities is cost-effective. This approach is feasible and could help while families wait to receive services. Also shared that First 5 is being asked to enter MOUs to establish relationships, this is originating from other First 5 providing services. The MOU is a multi-level document that may require the sharing of data of those who are seen at First 5 and being referred out.

D. Martinez, K. Wynn, and D. Saenz further discuss that although the CVHMG would be great to gain, further information is needed on its capacity and cost. However, D. Martinez feels that the services should be mandated and required through the healthcare system.

M Ramirez shares that she can bring a presenter on the CVHMG to the next PGA and Commission meeting. The item will not move forward.

D. Martinez, K. Wynn, and D. Saenz. agree to a presenter at the next PGA meeting.

K. Wynn asks if the SOC Chair should be present.

D. Martinez shares that the SOC Chair should be in attendance as audience.

No Motion to approve Item 6.0 is to be continued.

7.0 AGREEMENT RENEWAL WITH PERSIMMONY

M. Ramirez shares that item 7.0 is no longer an action item and will be tabled due to quote clarification.

8.0 STAFF UPDATES

M. Ramirez shares it is the end of the year the growing family library events were held and went well with good participation. There are extra books that may be able to be utilized in a future event.

D. Gonzalez shares that out of 29 providers 27 completed the 5-module trainings, participants overall liked the topics and the accessibility to have the training available online.

D. Martinez shares her concern with shrinking funds and the possibility of getting First 5 into being a 501C3 to have more funding opportunities.

9.0 ANNOUNCEMENTS

No Announcements

10.0 NEXT MEETING
AUGUST 23, 2024

11.0 ADJOURNMENT
10:38 AM

DRAFT



TO: First 5 Madera County Programs and Grants Award Committee

FROM: J. Monica Ramirez, Executive Director
Diane Sandoval, Senior Program Manager

SUBJECT: Agreement Renewal – Data Management Services- Persimmony International Inc.

DATE: August 23, 2024

RECOMMENDED ACTION:

Review and approve to move forward for Commission consideration an agreement renewal with Persimmony International Inc. to continue providing data management services for Fiscal Year 2024-2025. The agreement includes an option to renew for three (3) additional years based on performance and availability of funds: year-one \$13,000, year-two \$13,000, year-three \$13,000, and year-four \$13,000, making the amount not exceed \$42,000 for four years.

BACKGROUND:

On October 5, 2022, the Commission approved a two-year contract agreement with Persimmony International Inc. to provide data management services, including database license and technical assistance and support.

First 5 Madera County (F5MC) staff have been collaborating with Persimmony and funding partners over the past year to transition from manual data collection to the Persimmony data software system to streamline the data entry process. As of the fourth quarter of the fiscal year 2023-2024, Persimmony has been the primary method for entering client and program-level data for state reporting requirements.

Given the positive outcomes of the trial period, staff recommends renewing the agreement with Persimmony International Inc. for an additional three years. Continuing the data management system with Persimmony will ensure ongoing reliability, consistency, and enhanced knowledge. The renewal agreement will include access to the fiscal module, previously excluded.

FISCAL IMPACT:

Data management service costs are set aside annually in the F5MC Budget. The recommended agreement renewal with Persimmony is \$13,000 annually for four years. However, should the cost of services exceed the allotted funds, the Commission will be notified.

CONCLUSION:

If approved, this item will go to the Commission's next regularly scheduled meeting for review and approval. If not approved, staff will seek guidance from the Committee outlining the next steps.

Persimmony Software

Software to streamline case management.

Exhibit A - Order

26895 Aliso Creek Rd. SteB 241
 Aliso Viejo, CA 92656
 949-770-5551
 sales@persimmony.com | www.persimmony.com

DATE [Document.SentDate]

TO [Client.Company]
 [Client.StreetAddress]
 [Client.City] [Client.State] [Client.PostalCode]
 [Client.Phone]
 [Client.Email]

This Order Form ("Order"), effective upon the Effective Date of the MSA, documents the Services being purchased by Customer under the terms and conditions of the MSA dated [Document.SentDate] between Persimmony International, Inc. ("Persimmony") and [Client.Company] ("Customer"). Capitalized terms used herein and not otherwise defined will have the same meanings given to them in the MSA.

1. Subscription Services. The Subscription Services include the following:

Period of Performance	Description	QTY	Rate	Total
Base Period: 7/1/24-6/30/24	Persimmony First5 Software Subscription (1-10 users)*	1	\$13,000	\$13,000
Option Period 1: 7/1/25- 6/30/26	Persimmony First5 Software Subscription (1-10 users)*	1	\$13,000	\$13,000
Option Period 2: 7/1/26-6/30/27	Persimmony First5 Software Subscription (1-10 users)*	1	\$13,000	\$13,000
Option Period 3: 7/1/27-6/30/28	Persimmony First5 Software Subscription (1-10 users)*	1	\$13,000	\$13,000
			SubTotal	\$42,000

*Price reflects current cost of licenses for 2024, each option year is subject to COB increase

2. Pricing and Taxes. The fees stated herein include access and use of the Services during the Subscription Term for the stated number of Users. Upon execution of this Order, Persimmony will issue an invoice or charge Customer’s designated payment method in accordance with the Agreement. All fees are in U.S. Dollars and are exclusive of any applicable sales or use taxes. If Persimmony is obligated to collect or pay these taxes, they will be stated separately on each invoice, unless Customer provides Persimmony (in advance) a valid tax exemption certificate authorized by the applicable taxing authority. If Customer is required by law to withhold any taxes from its payments to Persimmony, Customer must provide Persimmony

with an official tax receipt or other appropriate documentation to support such withholding and reimburse Persimmony for such withholding tax. Except as expressly set forth in the Agreement or when required by applicable law, (a) all fees are non-cancellable and once paid are non-refundable; and (b) quantities purchased cannot be decreased during the term of the Agreement.

3. Purchase Orders. If Customer requires purchase orders, vendor registration forms, payment or vendor portals, or the like, they will be for convenience only, and all associated terms and conditions (pre-printed or otherwise and regardless of how or when referenced) will be void and of no effect, even if Persimmony signs or otherwise acknowledges the same.

Name: [Client.FirstName] [Client.LastName]

Name: [Sender.FirstName] [Sender.LastName]

Date:

Date:

Persimmony Software

Software to streamline case management.

26895 Aliso Creek Rd. SteB 241
 Aliso Viejo, CA 92656
 949-770-5551
 success@persimmony.com | www.persimmony.com

Exhibit B - Subscription Access Features

DATE 7/29/24

TO Madera First 5
 Madera, CA 93638
<https://first5madera.org/>

This Subscription Access Features Form, effective upon the Effective Date of the MSA, documents the Services accessible by Customer under the terms and conditions of the MSA dated 7/29/24 between Persimmony International, Inc. (“Persimmony”) and Madera First 5 (“Customer”). Capitalized terms used herein and not otherwise defined will have the same meanings given to them in the MSA.

1. Subscription Access Features. The Subscription Services include the following access to Persimmony software features:

Feature	
Persimmony Software Subscription (up to 10 users)	See Exhibit A for Pricing Detail
System Maintenance	
SaaS Operations	
User Access	
Fiscal Module	
Unlimited Assessments and Standard Reports	
Performance Measurement Module	
All Database Enhancements (Persimmony Roadmap)	
Technical Assistance and Support	Included
Technical Support Portal (support.persimmony.com)	
Persimmony Success Team Access	
OnDemand Training (Videos & User Guide)	

Feature	
Evaluator Support	
Annual State Reporting Support	

2. Agreement Terms and Pricing: Please see the Persimmony **Master Services agreement** for full details as to the terms and conditions of this contract and **Exhibit A** for pricing details.

Name: [Client.FirstName] [Client.LastName]

Name: [Sender.FirstName] [Sender.LastName]

Date:

Date:



TO: First 5 Madera County Program and Grant Awards (PGA) Committee

FROM: Monica Ramirez, Executive Director
Desty Gonzales, Program Specialist

SUBJECT: 2023-2024 Funded Program Year-End Summary

DATE: August 23, 2024

RECOMMENDED ACTION

This item is informational and intended to keep the Committee and Commission apprised of funded programs' Year-End progress for Fiscal Year 2023-2024.

BACKGROUND

First 5 Madera County (F5MC) has funded programs that support children 0-5 for the past 24 years. As part of this process and to maintain Proposition 10 funding requirement every First 5 in the state must implement data collection and evaluation strategies that demonstrate funds effectiveness of programs. As such, F5MC collects quarterly data from each funded program and project to reflect deliverables reached and outcomes. Additionally, each year staff provides a mid-year funded program process summary and a year-end summary report to keep the Committee and Commission informed on funded programs progress.

KEY POINTS

1. Community-Initiated Funded Programs wrapped their second year of operation with activities revolving around implementation of programming. Funded programs are:
 - a. Triple P – Centro Binacional
 - b. Raising a Reader – Madera County Libraries
2. Commission-Initiated Funded Programs continued core programming and activities as usual.
 - a. The Family Resource Centers (FRCs) provided Play and Learn activities, PKU sessions, and FRC on Wheels activities in the outlying areas of Madera County.
 - b. Special Projects continued delivering its Child Passenger Safety program and Mobile Vision Screening and Eye Exams.
 - c. Preventive Services Program (PSP) streamlined family engagement efforts with referrals from Department of Social Services and walk-in clients from the Targeted Enrichment Neighborhood (TENS) providing opportunities for families to participate in Play and Learn classes, ASQ's, Protective Factors, ACES's surveys, and case management style assistance.

Year to date investment explanation is below:

INVESTMENT	ANNUAL BUDGET	YTD EXPENDITURES	UNSPENT BALANCE
Community-Initiated	\$200,000	\$192,615.45	\$7,384.55
Family Resource Centers	\$639,691	\$453,510	\$186,181
Special Projects	\$385,965	\$291,794	\$94,171

CONCLUSION

No action. The item is information only and will be presented at the next Commission Meeting.

End of Year (June-July)
Community-Initiated Funded Programs Progress Summary
FY 2023-2024

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
Madera County Library: Raising A Reader	County of Madera	# of Unduplicated Caregivers	200	# of Unduplicated Caregivers	100	\$100,000	\$83,362.89	<p>Library staff has been implementing the Raising a Reader (RAR) for the last 4 quarters at four library locations, Madera, Chowchilla, Oakhurst, Madera Ranchos, including two school sites, Berenda, and Sierra Vista. The program ran for two 12-week sessions and made great progress. However, the library faced some challenges when purchasing new Raising A Reader materials. Although, materials did arrive in quarter 4 and have been able to be utilized.</p> <p>Despite the challenge of not gaining adult participation in kick off events, the library staff partially achieved the implementation of the Raising A Reader program. They provided support and guidance to 155 children and 100 parents through the weekly exchange of program materials. The library has also added Arabic books to be provided to participants who speak Arabic. Additionally, the library was looking for innovative ways to increase participation, which led Library staff to add two TK classrooms that participate in RAR successfully. Feedback received from a classroom at Berenda Elementary is that the teacher loves the program and loves that the library can provide the program to the children at no cost.</p>
		# of Unduplicated Children	200	# of Unduplicated Children	155			
		Red Book Bag Session	2	Red Book Bag Session	2			

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
Centro Binacional para el Desarrollo Indígena Oaxaqueño (CBDIO): Triple P	City of Madera	Referrals & Outcomes	N/A	Referrals & Outcomes	21	\$114,999.47	\$106,251.56	<p>CBDIO continues to successfully implement the Triple-P program through outreach and awareness efforts delivered in different dialects from the native Oaxacan languages of Triqui, Mixteco, Zapotec, and Chatino. They have reached 1066 individuals via group presentations or one-on-one visits. CBDIO staff leveraged their organization's audience as many families came to their doors seeking other resources such as information regarding the foodbank and Summer EBT 2024.</p> <p>These outreach efforts resulted in 134 unduplicated parents participating in 25 parent educational sessions with topics such as Resilient Children, Creating Good Bedtime Routines, Handling Disobedience, etc. In total 24 referrals were made with 21 connected to services to Community Action Partnership Madera, Doors of Hope, DMV, CVOC, Parent Resource Center, Madera Coalition For Community Justice. Following completed referrals there are 3 referrals with pending outcomes which will be reported on the mid-year summary.</p>
		# Unduplicated Parents Receiving:	200	# Unduplicated Parents Receiving:	1,066			
		Triple P Level 1		Triple P Level 1				
		Triple P Levels 2 & 3	90	Triple P Levels 2 & 3	134			



Year-End Summary (June-July)
Commission-Initiated Programs Progress Summary
FY 2023-2024

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET	YTD TARGET	ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
FAMILY RESOURCE CENTERS (FRCs)						
FRC Madera	City of Madera	FRC Playgroups 100 ASQ Screenings 30 Community Trainings 1 Parent Ed Workshops 20 PKU Sessions 3 Outreach TBD	FRC Playgroups 220 ASQ Screenings 29 Community Trainings 1 Parent Workshops 35 PKU Sessions 1 Outreach 729 adults	\$639,691	\$453,510	<p>The Madera FRC has an impactful role in providing services in Madera County. This Fiscal year numbers not only reflect the attendance of children and parents but also the impact that the Madera FRC has on the community. In total, the Madera FRC organized 220 playgroups that varied in different activity topics weekly. In total the FRC served a total of 244 unduplicated children and 202 unduplicated parents/caregivers.</p> <p>The Madera FRC additionally conducts Preschool University (PKU). PKU consists of classes that are 3 times a week for a total of 12 weeks of programming. In total the FRC conducted 4 Preschool University (PKU) sessions in which 65 children were enrolled and completed the PKU programming. Alongside the PKU programming 35 parent workshops were coordinated for PKU parents to attend.</p> <p>The FRC also conducted 29 ASQ screenings with referrals made to EPU, CAPMC, F5 FRC PKU and playgroups. As a result 35 referrals were made and 18 were successful in receiving services.</p> <p>To ensure that Madera County residents are aware of the services and resources, the FRC participated in 6 community awareness events providing 729 unduplicated adults with information about FRC services and resources. Additionally, staff coordinated 1 community training course with the topic on ASQs in which 19 providers participated.</p> <p>The FRC also supplied 411 parents with emergency diapers and enrolled 22 parents into the Diaper Subscription Program. The Diaper Subscription Program consists of 3 months of diapers being dispersed to families identified as "frequent need" through emergency diaper services. Families enrolled in the Diaper Subscription Program must commit to</p>

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
								participating in one playgroup activity for the subscription program's length.
FRC on Wheels Chowchilla	City of Chowchilla	FRC Playgroups ASQ Screenings Outreach	60 20 TBD	FRC Playgroups ASQ Screenings Outreach	71 0 130 adults			In efforts to continue to serve the Chowchilla community the FRC has concentrated its efforts in a new location, offering core programming at the Chowchilla library. In total, the FRC hosted 71 playgroups. Of the 71 playgroups 94 unduplicated children attended. Additionally, one outreach event occurred which was the successful Chowchilla Spring Carnival. This resulted in 208 children from 0-5 participating in events and 130 parents in attendance. The FRC on Wheels supplied 8 parents with emergency diapers for the whole year.
FRC on Wheels EMC	Oakhurst, North Fork and Madera Ranchos	FRC Playgroups Outreach	30 TBD	FRC Playgroups Outreach	29 146 adults			Alongside the services delivered in Chowchilla the FRC also delivered services in Eastern Madera County and the Madera Ranchos. Although this area tends to pose challenges due to their rural location the FRC successfully delivered 29 playgroups with attendance of 78 unduplicated children. Additionally, staff participated in 2 outreach events to promote the FRC on Wheels and activities connecting directly with 146 unduplicated adults.
SPECIAL PROGRAMS DEPARTMENT								
Injury Prevention	County-Wide	Child Passenger Safety Education Car Seat Fittings Car Seats Distributed	40 32 35	Child Passenger Safety Education Car Seat Fittings Car Seats Distributed	103 60 52	\$7,500	\$5,634	The Special Projects Child Passenger Safety Car Seat Technician conducted 4 group education events reaching 20 caregivers through this effort, and 43 one-on-one education sessions reaching 60 parents/caregivers for a total of 63 parents/caregivers receiving car seat education. Through car seat fittings,

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
								60 children were assisted directly, resulting in 52 car seats being distributed to families for reasons like expiration, missing parts or labels, financial etc. Special Projects Child Passenger Safety Technicians also collaborated with Valley Children's Hospital, where 40 parents were provided car seat education and car seats by Valley Children. The overall annual total was 103 parents/caregivers who received child passenger safety education, and 52 car seats were distributed.
Mobile Vision	County-Wide	Vision Screening Sessions Vision Screening Mobile Vision Events Children Receiving Glasses	4 160 3 19	Vision Screening Sessions Vision Screening Mobile Vision Events Children Receiving Glasses	4 285 3 35	\$15,500	\$13,758	Special Projects staff conducted four vision screening sessions and three collaborative mobile eye exam events in total for the year. This resulted in 285 children receiving a vision screening at their school site through the mobile vision screening event. Following the vision screening an eye exam event took place which resulted in 46 children attending eye exam events with an optometrist through the mobile vision van and 27 children who were identified with a vision concern and were able to receive glasses made onsite along with a prescription to obtain a second pair at their convenience. Additionally Mobile Vision collaborated with Migrant Head Start and provided a Mobile Vision Eye Exam opportunity. Mobile Vision provided glasses for a total of 35 children for the year.
Preventative Services Program/Targeted Enrichment Neighborhoods (PSP/TENS)	County-Wide/City of Madera	Case Managed Families ASQ Screening Protective Factors ACEs Screening Referrals	10 A/NA A/NA A/NA	Case Managed Families ASQ Screening Protective Factors ACEs Screening Referrals	35 29 19 12 22	\$54,000	\$0.33	For the full year lead staff worked with a total of 35 families and have been able to provide one-on-one direct service conducting assessment screenings, resource support, referrals, and follow-ups to ensure connections are made. The PSP program has seen great success, which can be attributed to the work of lead staff whose dedication, empathy and motivation is helping grow the number of families opening up to receiving services. Through consistent program implementation, routine and timely check-ins and phone calls staff has provided a total of 29 ASQ screenings with 14 having concerns with referrals provided to the following resources, FRC playgroups, EPU, CRVC and MUSD. In total for the year 5 Families have received services that span from CVRC, WIC and the car seat program.

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
Infant Health and Safety	County-Wide	Community Training Partnerships	2	Community Training Partnerships	3	\$10,000	\$10,000	During the year staff worked with local partners to provide professional development opportunities for local professionals. In total staff collaborated with 3 community training partnerships with California Health Collaborative. The first event was the Perinatal Symposium, which took place in September with 200 professional attendees and 28% of those practicing in Madera County. Secondly there was a Baby Shower for Father Hood event which focused on celebrating new Fathers. This collaboration served 74 parents and 31 children 0-5. Lastly First 5 Madera collaborated to provide sponsorship for the Central Valley Lactation Conferences which served 236 participants. The analysis feedback revealed that 98.6% of attendees were California residents with roughly 51 % being Fresno County residents and 10% being from Madera County. In total for the year 510 adults were served and 31 children from 0-5.
Growing Family Libraries	Eastern Madera County	EMC Families	100	EMC Families	46	30,000	30,000	In efforts to serve Eastern Madera County staff partnered with the North Fork and Oakhurst library to host a two-day event for families. The event consisted of a literacy awareness presentation at both locations, 46 unduplicated families attended and 70 unduplicated children from 0-5 were given vouchers of \$75.00 to be used to purchase books to grow their very own library at home.
Regional Home Visitation (RHV)	County-Wide	Community Convenings	2	Community Convenings	1	57,285	28,342	The Regional Home Visitation program focuses on coordinating convenings county wide for Madera County home visitors. Although the program began later in the year at the end of quarter two implementation of programing began and the lead staff for RHV utilized their coordination skills and was able to coordinate one convening. This convening focused on The Courage to have hope in a Crisis and was presented by Dr. Suzana Dobric Veiss. In total 32 home visitors and case managers attended the convening and received technology equipment to be utilized in their profession. The lead of RHV continues to work in coordinating and planning for the next year.
		Attendees	A/NA	Attendees	32			
IMPACT Legacy	County-Wide	Professional Development trainings	A/NA	Professional Development trainings	2	189,774	121,368	The IMPACT legacy Program focuses on providing professional development training to family childcare providers and family friends and neighbors throughout Madera County. The programing began late in the second quarter, but the lead successfully planned and executed two training courses. One training course focused on topics around brain development and trauma while the other was based around Program for
		Providers	A/NA	Providers	34			

FUNDED PROGRAM	SERVICE AREA	ANNUAL TARGET		YTD TARGET		ANNUAL BUDGET	YTD EXPENDITURE	PROGRESS SUMMARY
								<p>Infant Toddler Care. Together, 34 childcare providers were served.</p> <p>Additionally, IMACT legacy used matching funds to support The Madera Community College, AmeriCorps Members and a local preschool and daycare.</p>



AGENDA ITEM 7.0

ACTION INFORMATION

TO: First 5 Madera County Programs and Grants Award Committee

FROM: J. Monica Ramirez, Executive Director

SUBJECT: Central Valley Help Me Grow Presentation

DATE: August 23, 2024

RECOMMENDED ACTION:

The Committee will receive an in-depth presentation on the National Help Me Grow model as it relates to Central Valley Help Me Grow (CVHMG). After review the Committee will agree to move forward for Commission consideration a funding allocation not to exceed \$60,000 for three-year investment.

BACKGROUND:

On June 28, 2024, the PGA Committee was presented with the National Help Me Grow early childhood system-building model and the Central Valley's HMG regional approach with a request for funding allocation of \$60,000. After review and discussion, the Committee requested additional information and asked for the item to be returned with a presentation from Help Me Grow National Consultant Tom Altmayer.

A regional approach with neighboring counties was initiated by Valley Children's Hospital and who will house the Regional Program Coordinator to facilitate and lead the full implementation of CVHMG under the direction of the advisory committee and National Help Me Grow network.

The regional approach consists of four counties: Merced, Madera, Fresno, and Kings. Fresno and Merced counties have been implementing HMG for several years. The cost for three years is expected to be \$806,318. Each county's contribution was calculated based on the Prop 10 funding allocation formula with Madera Counties breakdown at 2% of the total cost. F5MC's total investment is estimated at \$60,000 for three years. The opportunity to implement at a regional level is a cost-effective approach and aligns with the Commission's commitment to invest in projects leveraging funds.

FISCAL IMPACT:

A total funding amount of \$60,000 will be set aside from the general fund.

CONCLUSION:

If approved, the item will be moved forward to the September 2024 Commission meeting for consideration. F5MC will set aside \$60,000 to invest in the CVHG and ensure children have access to a coordinated system for early identification and intervention. If not approved, staff will seek guidance from the Committee outlining the next steps.

Help Me Grow
A Regional Model

August 2024

AC
Altmyer Consulting, Inc.

2

Agenda

- Why Help Me Grow is Needed
- Help Me Grow Core Components
- Benefits of a Regional Model
- Next Steps

3

Why Help Me Grow is Needed

- Approximately 25% of children 0-5 are at risk for developmental delays
- Approximately 70% of those with developmental delays go undetected until they reach Kindergarten.
- Developmental delays can be difficult to identify and may not be detected by a single screening. The American Academy of Pediatrics (AAP) recommends that all children be screened during well child visits using a validated screening tool at the ages of 9, 18 and 24/30-months.
- According to a 2022 report from DHCS, the percentage of children served by managed care plans that were formally screened in the prior 12 months for developmental, behavioral, and social delays ranged between 1% and 30% throughout the Central Valley.



5

HMG Components & Activities

Core Component	Key Activities
Centralized Access Point	<ul style="list-style-type: none"> Specialized child development line Linkage and follow-up Resourcing resources Real-time directory maintenance
Family & Community Outreach	<ul style="list-style-type: none"> Engaged community partners Networking Community events and trainings Marketing
Child Health Provider Outreach	<ul style="list-style-type: none"> Physician champion Training on surveillance and screening Closing the feedback loop
Data Collection and Analysis	<ul style="list-style-type: none"> Data monitoring Sharing data across partners Continuous quality improvement Community change through data

6

Centralized Access Point

A Centralized Access Point serves as the “go-to” place for families, physician, early care educators and other professionals


- Education and support to families
- Provides referrals to community-based supports
- Empowers families to overcome barriers to service
- Follow-up to make sure linkage are successful

Benefits of regionalization

- One number for the Central Valley
- Dedicated staff trained on screenings and referrals
- Referrals to limited to a single county
- Economies of scale

7

Child Health Provider Outreach



The HMG model supports physicians to promote early identification and intervention by:


- Educating, training and encouraging providers to conduct recurring developmental screenings
- Providing a centralized access point that can provide care coordination and assist in referrals

Benefits of regionalization

- Centralized function solely working with health plans, FQHCs, clinics, individual practices, AAP, Valley Children's, regional center including education and training
- Shared tool and written materials (e.g., prescription pads, promotional brochures, etc.)

8

Family & Community Outreach



Family & Community Outreach encourages support and participation in the HMG by:


- Engaging families and CBOs through participation in community events and forums
- Facilitate provider networking
- Gathering and updated information used to support a local early childhood resource directory

Benefits of regionalization

- Dedicated staff
- Shared promotional materials
- Centralized resource directory

9

Data Collection and Analysis



Data collection and analysis ensures the capacity for continuous system improvement

Benefits of regionalization

- One shared network
- More credibility with state and other regional organizations

Desired Outcomes of a Regional Model

- **Stabilish and expand access to HMG Services** for children within the Central Valley.
- **Increase Developmental Screenings**—Increase the use of formal developmental screenings of children 0 to 5 through an enhanced focus on Child Health Provider outreach and working with local health plans.
- **Higher Profile of HMG and its Services**—Increased awareness of HMG and its services through consistent and more expansive marketing and outreach efforts.
- **Local Community Outreach and Care Coordination**— Preserve local community outreach and care coordination to ensure a tailored approach to addressing community needs.
- **Improved Productivity and Efficiencies** – Improve economies of scale through shared costs for leadership operations, marketing, and administration.



Overview

Early Conversations and Consultant Work

- In 2022, local stakeholders including Valley Children’s Healthcare, First 5 agencies in the Central Valley, and other community-based organizations began conversations regarding ways to work together to improve the screening and care for young children with developmental delays.
- After a number of meetings, stakeholders agreed to explore the development of a regional Help Me Grow system and contracted with Altmayer Consulting to help facilitate consensus around the function and design of a regional system.
- As a result of the engagement with the consultant, Valley Children’s, First 5 Fresno County, First 5 Kings County, First 5 Madera County and First 5 Merced County, have agreed to, and are in the process of, forming the Help Me Grow Central Valley program.

Help Me Grow Central Valley

- Help Me Grow Central Valley would begin as a three-year pilot program (CY2025 – CY2027) serving children and families in Fresno, Kings, Madera, and Merced Counties.
- Help Me Grow Central Valley would support implementation of the four main components of the Help Me Grow model working closely with existing local Help Me Grow programs to ensure that support is tailored to meet unique local needs.
- A Central Valley Help Me Grow Leadership Team will convene regularly to oversee the development and implementation of the strategic plan, track operational progress, and ensure for the long-term financial sustainability of the work. The Leadership Team will consist of representatives from Valley Children’s, First 5 Fresno, First 5 Kings, First 5 Madera, and First 5 Merced, with additional organizations added as needed.
- Valley Children’s would serve as the organizing entity for the program, responsible for the core strategic and administrative functions including hiring of staff and facilitating the design and implementation of the core components of the Help Me Grow model.
- Valley Children’s, First 5 Fresno, First 5 Kings, First 5 Madera, and First 5 Merced would jointly fund the costs of the initiative for the first three years and at the same time would work to find other funding sources to offset their costs during the pilot phase as well as funding to sustain the initiative beyond the first three years. The projected budget for the first three years is as follows.

HMGCV Total	Children’s	Merced	Madera	Fresno	Kings
Year 1: \$236,652	\$51,420	\$36,624	\$19,199	\$129,650	\$20,208
Year 2: \$247,109	\$67,145	\$35,868	\$18,803	\$126,975	\$19,791
Year 3: \$258,090	\$84,191	\$34,979	\$18,337	\$123,828	\$19,300

Next Steps

- September – November 2024: First 5 agencies approve funding and needed agreements are executed.
- December 2024 – January 2025: Recruit and hire Program Coordinator

- February – March 2025: Recruit and hire Administrative Assistant

DRAFT

I. Introduction

Help Me Grow (HMG) promotes the development, learning and social-emotional health of children. It is a comprehensive, evidence-based, coordinated system for early identification of delays in child development and a referral source to ensure that children have access to developmental and behavioral services and resources. Currently, the Central Valley has three HMG agencies: HMG Fresno, HMG Kern and HMG Merced. The goal of this study is to evaluate the benefits of and develop a plan for the creation of a regional of a Help Me Grow Initiative in the Central Valley that promotes collaboration, capacity building, enhanced screening levels, and improved systems of care for all children.

This study has involved three primary activities. First, we conducted an environmental scan of stakeholders involved in providing support to children (and their families) who are at risk of developmental delays. This scan included a review of the impact of the existing HMG programs, the use and availability of developmental screenings in the region, and the availability of early intervention services. Second, we conducted a peer review of other HMG agencies to identify potential benefits of regionalization, with a particular focus on HMG Inland Empire, California's first regional HMG. Third, we worked with an advisory committee that included representatives of participating First 5 agencies throughout the Central Valley and the three existing HMG agencies to evaluate the potential benefits of regionalization. This advisory committee was responsible for reviewing the feedback from the environmental scan and the peer review, detailing the benefits of a centralized HMG, and evaluating potential organizational and operational scenarios of a regional agency.

Set forth below is a summary of our findings and a recommended scenario for the creation of a regional HMG initiative in the Central Valley.

II. The Help Me Grow Model

HMG provides supports to families with young children at-risk for or experiencing developmental delays and disabilities. HMG connects children at risk to a comprehensive, coordinated system for early identification and referral to services by partnering with health care, early care and education and family support system. HMG service delivery model includes a series of programs and initiatives in four core areas:



Centralized Access Point

A Centralized Access Point assists families and professionals in connecting children to community resources that address developmental delays. This access point serves as the “go to” place for families, caregivers, early care educators and community-based organizations to assist in identifying developmental delays in children and referring them to appropriate intervention and supports.

Child Health Provider Outreach

Child Health Provider Outreach supports early detection and interventions efforts by encouraging healthcare providers to conduct periodic developmental screenings and providing them a centralized access point that can offer families with care coordination and assist in providing referrals.

Family & Community Outreach

Family and Community Outreach builds parent and community understanding of health child development, of how to assess a child’s developmental progress, and the availability of supportive services available to families.

Data Collection & Analysis

Data Collection & Analysis ensures the system is working effectively by conducting evaluations of the existing resource grid, identifying gaps in services and participating in advocacy efforts to improve early identification and intervention of at-risk children.

III. Why a Regional Help Me Grow in the Central Valley

According to HMG California, approximately 25% of children 0-5 are at risk for developmental delays and approximately seventy percent (70%) of those with delays go undetected until they reach Kindergarten. Undetected and untreated behavioral and developmental problems in children can have profound impacts. If these issues go without intervention, children have a greater risk of underperforming in educational outcomes as well as experiencing greater risk of social emotional issues.

Developmental delays, however, can be difficult to identify and may not be detected by a single screening. The American Academy of Pediatrics (AAP) maintains that early detection and intervention is a critical component of well-child visits and recommends that all children be screened during well child visits using a validated screening tool at the ages of 9, 18 and 24/30-months.

As part of this study, we reviewed current data from the California Department of Health Care Services (DHCS) related to developmental screenings. According to a 2022 report from DHCS, the percentage of children served by managed care plans that were formally screened in the prior 12 months for developmental, behavioral, and social delays ranged between 1% and 30% throughout the Central Valley. This data suggests that a significant majority of children within the region are not being screened with a periodicity consistent with the AAP guidelines and, therefore, it is even more critical to promote a coordinated system of developmental screenings and early intervention within the Central Valley.

As part of this study, we conducted interviews with stakeholders and providers in the region. Several consistent challenges and opportunities emerged related to addressing the developmental needs of children in the Central Valley:

- **Access to HMG Services** – Children 0 to 5 and their families in the Central Valley have limited access to HMG services (only available in Fresno, Kern and Merced counties). A regional HMG would provide HMG services across the Central Valley for all children at risk for developmental delays.

- **Use of Formal Screenings** – As referenced above, children in the Central Valley (as well as throughout California) do not appear to receive formal developmental screenings at regular intervals from their medical providers. With an enhanced focus on child health provider outreach, a regional HMG could focus on increasing the number and periodicity of developmental screenings.
- **Participation by the Child Health Community** – While each county works independently with their child health community to increase access to services, there are a limited number of coordinated efforts, especially as it relates to developmental screenings of children. A centralized HMG would focus its influence and the scale of its operations to increase participation and coordination by regional agencies that serve multiple counties within the valley (e.g., health plans, regional centers, children’s hospital, etc.).
- **Centralized Database of Community Resources** – Counties often struggle to develop wide-ranging databases that identify existing resources within their communities, especially when those referrals would require seeking services in an adjoining county. These databases are critical to offer meaningful referrals to children and them families. A regional organization would have the opportunity to develop or consolidate existing databases to create a more comprehensive resource directory.
- **Shared Learning and Resources** – Given the regional nature of many agencies that serve children in the Central Valley (e.g., Valley Children’s Hospital, Central Valley Regional Center, health plans, etc.), a centralized HMG in the valley would have a unique opportunity to benefit from economies of scale in providing services. From the creation of shared outreach and marketing materials to a “no wrong door” centralized access point, a regional HMG would have the opportunity to increase overall productivity and promote greater efficiencies.
- **Ensuring Local Outreach and Care Coordination** – The existing HMG agencies within the valley (Fresno, Kern and Merced) have had success in their local outreach efforts and providing tailored care coordination for at-risk families. To that end, while a regional HMG may offer opportunities to create more effective valley-wide services, some outreach and care coordination could remain local to ensure they address the unique needs of the communities.

Based on the foregoing challenges and opportunities, the advisory committee identified five key outcomes associated with a proposed regional HMG agency:

Key Outcomes for a Regional HMG

Expanded Access to HMG Services—expanded access to HMG services to all children within the Central Valley.

Increase in Developmental Screenings -- increased use of formal developmental screenings of children 0 to 5 through an enhanced focus on Child Health Provider outreach and working with local health plans.

Higher Profile of HMG and its Services – heightened awareness of HMG and its services through consistent and more expansive marketing and outreach efforts.

Local Community Outreach and Care Coordination – preservation of local community outreach and care coordination to ensure a tailored approach to addressing community needs for those counties currently providing those services.

Improved Productivity and Efficiencies – improved economies of scale through shared costs for leadership operations, marketing, and administration.

IV. Proposed Infrastructure for HMG Central Valley

Based on the outcomes and priorities outlined above, the advisory committee evaluated several organizational and operational scenarios for a regional HMG within the Central Valley. The following represents a summary of the preferred scenario as it relates to establishing a leadership infrastructure.

HMG organizations generally include the following collaborative infrastructure: an Organizing Entity, a Leadership Team, and a Program Manager. In the paragraphs below, we provide an overview of a proposed governance structure for HMG Central Valley.

A. Organizing Entity

The Organizing Entity facilitates the planning and implementation of the Help Me Grow Model. The primary roles include selecting a Program Manager, recruiting a Leadership Team, providing high-level oversight of HMG Central Valley's administrative and fiscal conditions.

In California, HMG agencies have generally been organized by an individual county's First 5 organization or in the case of HMG Inland Empire by a partnership between two First 5 agencies (San Bernardino and Riverside). The Organizing Entity for HMG Central Valley would be a collaborative of each of the participating First 5s within the valley.

The first role for the Organizing Entity is to designate a Program Manager and recruit a Leadership Team. These two parties would serve as the leadership and management for the HMG model within the Central Valley. Once these tasks have been accomplished, the role of the Organizing Entity will shift to providing high-level oversight to ensure the model is being operated in a fiscally responsible manner and ensuring the model is consistent with the overall purpose of HMG.

B. Program Manager

The role of the Program Manager to develop and operate the HMG model. This includes the design and implementation of strategies within each of the four core areas identified in the model: Centralized Access Point, Child Health Provider Outreach, Family & Community Outreach and Data Collection & Analysis. These functions can be provided directly by the Program Manager or individual functions or strategies can be contracted out to outside agencies.

As will be discussed more fully below in Section V, this study recommends that the Program Manager be responsible for all aspects of the implementation of the core functions but would delegate responsibility to local First 5s certain tasks associated with community outreach and care coordination. The purpose of this delegation of responsibilities is to allow select First 5s the ability to tailor these functions to the needs of their local community.

C. Leadership Team

The mission of the Leadership Team within the HMG Model is to facilitate the building of HMG system and ensuring its sustainability. As part of their role, they are tasked with developing the strategic vision and mission. This can include

providing strategic direction to the Program Manager, assisting in developing strategic partnerships within the different communities and tracking operational progress.

For HMG Central Valley, the Leadership Team would be selected by the Organizing Entity (the collective of participating First 5s). It is anticipated that the Leadership Team would include some or all of the participating First 5s. Additional members could include key strategic partners ranging from health plans, community-based organizations, and clinical providers. Once established, a formal governance structure should be developed to establish membership criteria, regular meeting schedule, voting rights, and working committees to ensure adequate programmatic oversight.

V. Implementation of HMG Central Valley Core Functions

The primary responsibility for the implementation of HMG's core functions resides with the Program Manager. The Program Manager designs and implements the core components using the strategic directions provided by the Leadership Team and the Organizing Entity. The Program Manager may directly perform each of the core functions or may delegate one or more of those functions to other agencies.

Using the priorities established by the advisory committee, set forth below are the proposed roles and responsibilities of the Program Manager and the individual First 5s with respect to the implementation of each of the four core HMG elements. The Program Manager for the proposed HMG Central Valley will be responsible for the overall design and implementation of each of the four core elements of the HMG Model. However, in several instances highlighted below, local First 5s may opt to provide key functions themselves to tailor services to their unique communities. Below is a summary each core component and the assigned roles and responsibilities for implementation.

1. Centralized Access Point

A Centralized Access Point assists families and professionals in connecting children to community resources that provide early intervention services. The Centralized Access Point typically consists of a call center that connects children and their families to care coordinators. These care coordinators can provide education and information about developmental milestones, offer access to developmental screenings, and may refer families to resources to address

developmental or behavioral concerns. Care coordinators can also assist families in overcoming barriers to services and provide follow up to make sure linkages are successful and all of the needs of the child have been addressed.

The Centralized Access Point has three primary activities. For each of these activities, we have identified the partner(s) whose role and responsibility it is for implementation:

- a) *Establish a Specialized Child Development Line (Program Manager) --*
The Program Manager will develop and staffing a centralized call center with access to the residents of the Central Valley. The call center should be staffed with care coordinators trained in telephone casework, who are culturally proficient, and ideally have backgrounds in child development. Families, caregivers or professionals who contact this child development line will receive a preliminary assessment of the caller's needs.
- b) *Compile and Maintain a Resource Directory (Program Manager/First 5s)*
– The Program Manager will develop and maintain a centralized resource database to be used by care coordinators to provide referrals to children and their families. This directory may be compiled by working with local agencies (e.g., First 5s, local 211s, etc.) or private agencies (e.g., Unite Us, etc.) to identify community resources that serve children with developmental delays. In addition to this centralized database developed by the Program Manager, First 5 agencies that opt to provide local referrals and care coordinate will also be required to maintain a resource database.
- c) *Research and Linkages to Services for Families (Program Manager/First 5s)* - The Program Manager will be responsible for receiving all initial calls to the HMG Central Valley telephone line. Centralized care coordinators will conduct an assessment of all first-time callers to evaluate the nature of caller's needs. These care coordinators will handle all routine issues such as providing educational information, information on how to conduct a developmental screening, and referrals for developmental services in non-complex cases. They will also handle more complex referrals for counties where those counties have not opted to provide care coordination services in such cases. Where a county has opted to offer care coordination for complex cases or cases involving referrals not accessible from the

centralized database, the centralized call center will refer these families to their local First 5s. Follow-up care coordination will be performed by the agency providing the referral.

2. Child Health Provider Outreach

Child Health Provider Outreach supports early detection and intervention of children at risk for developmental delays by (1) promoting the use formal developmental screening tools and (2) connecting families referred by medical providers to appropriate community resources. The Program Manager will be responsible for implementation of this core element. Best practices suggest that some or all of the following tasks be conducted as part of this process:

- a) *Understand the Medical Community* – learn about the medical community and build relationships with practice groups, health plans and clinics who serve children.
- b) *Identify a Physician or Institutional Champion* –use trusted partners to help influence the health provider community to be more proactive in conducting developmental screenings and taking action through early intervention.
- c) *Involve Providers and Health Plans in HMG Planning and Leadership* – giving providers and health plans a planning and leadership role in HMG will allow them to provide critical input regarding communication strategies with medical providers as well as developing an effective referral process from clinicians to HMG care coordinators.

3. Family and Community Outreach

Family and Community Outreach builds parent and community understanding of healthy child development, supportive services available to families in the community, and how both are important to improving children’s outcomes. The implementation of this element will be shared by the Program Manager and local First 5 agencies.

Family and Community Outreach traditionally involves three core activities. The following is a summary of each activity and what organization will be responsible for implementation:

- a) *Identify and Recruit Community Champions (First 5s)* -- Identify, recruit and training community champions to both promote the understanding of development milestones and issues, and to encourage the use of HMG as a resource to families within the community.
- b) *Conduct Community Outreach Marketing Materials (Program Manager)* – Develop customizable marketing materials for the use in the different communities. These materials will include informational materials on developmental milestones, the benefits of developmental screenings and the use of HMG as an informational and referral resource.
- c) *Community Outreach and Marketing (First 5s)* – Conduct community outreach to families and local community-based organizations. The goal of these outreach efforts is to promote early identification and intervention as well as create awareness of HMG and its services.

4. Data Collection and Analysis

Data Collection and Analysis supports evaluation, helps to identify systemic gaps, bolsters advocacy efforts, and guides quality improvement. Having a data collection and measurement platform is essential to gather data, conduct analysis and achieve collective impact. The Program Manager will be responsible for procuring and maintaining a database of key performance indicators, conducting continuous performance improvement analyses, and reporting to HMG National.

VI. Initial Implementation Process

This plan outlines the initial steps necessary to implement an HMG Central Valley.

A. Formalize an Organizing Entity for an HMG Central Valley

Formalize a memorandum of understanding (MOU) between the First 5s participating in the HMG Central Valley. The MOU would detail a decision-making structure, define initial funding commitments, and a establish process for selecting a Leadership Team and Program Manager.

B. Select a Program Manager

Using the process set forth in the MOU, the Organizing Entity will identify and contract with a Program Manager. The selection of the Program Manager is critical to the success of the model, especially given the complexity of implementation across multiple counties.

The qualifications of a Program Manager should include some or all of the following characteristics:

- Knowledge of and experience in children's health issues with particular emphasis in children with developmental delays.
- Experience in collaborating with health providers, health plans and medical clinics that serve children.
- Experience in community outreach especially efforts targeting children and their families.
- Experience in care coordination services and providing resource and referrals.
- Experience in managing collaboratives and/or advisory groups.
- Understanding of the early childhood services available within the Central Valley.

C. Recruit a Leadership Team and Develop a Governance Structure

Working with the Program Manger, the Organizing Entity should recruit members to be a part of the Leadership Team. The Leadership Team can be made up of representatives from agencies, community partners and individuals who have experience in early childhood services. The Leadership Team would also include members of the Organizing Entity. Members of the Leadership Team should be committed to working in their field to promote HMG as a resource and referral system.

As an initial task, the Leadership Team – with the advice of and consent of the Organizing Entity -- should develop a governance structure for itself to ensure a regular meeting structure, clear roles and responsibilities, work groups that will oversee the operations of the HMG and the Program Manager, and the process for

adding or releasing Leadership Team members. Leadership Team meetings will generally be planned for and organized by the Program Manager.

D. Prepare for an HMG National Site Visit and Community Meeting

As part of the process for becoming an HMG affiliate, HMG National conducts a three-day site visit followed by a community-wide meeting. During this process, staff from HMG National will help introduce the HMG Model to the community and better understand the needs of the community. At the conclusion of the site visit, HMG Central Valley will hold a community meeting by inviting participants who may have an interest in or involvement with the early identification and intervention system. The community meeting will focus on educating the participants about HMG, creating discussions and discussion groups around early care and intervention, and developing strategic partnerships.

E. Define the Strategic Direction for HMG Central Valley

The Leadership Team should develop the core principles of HMG Central Valley including the values, vision, and mission. These core principles can be encompassed in a strategic plan or other document that provides the Program Manager with sufficient direction to implement the HMG Model consistent with the needs of the residents of the Central Valley. The Leadership Team, in conjunction with the Program Manager, will also develop a communication strategy for informing the region about the HMG system.

VII. Conclusion

This study was commissioned by Valley Children's Hospital, First 5 Fresno, First 5 Kern and First 5 Merced to evaluate the value of a regional HMG within the Central Valley and develop initial strategies for its proposed implementation. The study included the participation of an advisory committee comprised of representatives from several First 5 agencies within the Central Valley and some of the Program Managers from the existing HMG agencies. This advisory committee assisted in evaluating the benefits of a potential regional HMG, the recommended priorities of a regional agency, and a preferred scenario detailing the roles and responsibilities for the Organizing Entity, Leadership Team and Program Manager of a HMG Central Valley. The foregoing report details the findings and recommendations of the Coordinated Council.

HELP ME GROW CENTRAL VALLEY

Program Coordinator Position Description

Position Overview

Valley Children's Healthcare, First 5 Fresno County, First 5 Kings County, First 5 Madera County, and First 5 Merced County, have partnered together to create Help Me Grow Central Valley to strengthen our community's early developmental screening and intervention system so families with young children receive the resources they deserve.

According to Children Now's 2024 California Children's Report Card, only 26% of children ages 0 - 3 are receiving appropriate screenings for developmental delays. If delays are not identified and addressed early, children have a greater risk of underperforming in educational outcomes and experiencing social emotional challenges.

By promoting greater collaboration and coordinating of resources, Help Me Grow Central Valley promises to increase the number of young children screened and linked to early intervention services, promoting the overall health and wellbeing of children across the region.

Help Me Grow Central Valley is based on the national Help Me Grow early childhood system-building model. According to [Help Me Grow National](#), Help Me Grow is not a stand-alone program, but rather a system model that utilizes and builds on existing resources in order to develop and enhance a comprehensive approach to early childhood system-building in any given community. While Help Me Grow Central Valley is just beginning, the Help Me Grow model has been implemented by counties and states across the country for nearly twenty years. In this position, the Program Coordinator will facilitate and lead the full implementation of Help Me Grow Central Valley, with the support of an advisory committee and national Help Me Grow network. In the first year, one of the key responsibilities of the Program Coordinator will be to establish Help Me Grow Central Valley as a formal affiliate of the national Help Me Grow program.

Position Summary

Working with the Help Me Grow Central Valley Advisory Committee, the Program Coordinator will facilitate all aspects of Help Me Grow Central Valley using the "collective impact" model as a framework for success.

The partnering organizations have agreed to fund Help Me Grow Central Valley for an initial three-year term with future funding to be determined at a later date.

Position Qualifications

- Minimum of a bachelor's degree in special education, early childhood development, or related health or human services field.
- Minimum three years' experience working with children and families and preferred experience working with children with special needs, their families and the systems of care that support them.
- Familiarity with early childhood programs and services available in the region.
- Experience with community outreach, referral processes, and care coordination for children with special needs.

- Experience managing collaborative, multi-organizational initiatives built on the collective impact model or other similar frameworks.
- Strong interpersonal skills and demonstrated ability to work and communicate effectively with families, including families in crisis.
- Bilingual, English/Spanish, highly desirable.
- Experience working with ethnically and linguistically diverse children, families, and professionals.
- Experience with developing and managing budgets and with marketing programs and services.
- Ability to work independently.

Position Accountabilities

- Coordinate the development and management of all aspects of Help Me Grow Central Valley including hiring and supervising staff and designing and overseeing the key components of the Help Me Grow model including a centralized access point, outreach to providers and families, data collection and analysis, and successful affiliation with national Help Me Grow.
- Develop and maintain relationships with early childhood partners, health care providers, Central Valley Regional Center, health plans, and other key stakeholders.
- Represent Help Me Grow Central Valley on relevant community-based committees, maintain relationships with key stakeholders, and serve as a liaison between state and national Help Me Grow organizations.
- Manage and help facilitate the effective operations of the Help Me Grow Central Valley Advisory Committee.
- Administer all necessary agreements, including agreements amongst the partnership organizations as well as agreements with any outside vendors or consultants.
- Develop and implement a strategy for promoting participation in Help Me Grow Central Valley amongst families, providers, community-based organizations, and other key stakeholders.
- Develop a long-term strategic plan for Help Me Grow Central Valley's operational and financial sustainability beyond the initial three-year period.
- Other accountabilities as needed.